



House of Commons

Committee of Public Accounts

The Drug Treatment and Testing Order: early lessons

**Ninth Report of
Session 2004–05**

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and Testing Order:
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Session 2004–05**

*Report, together with formal minutes,
oral and written evidence*

*Ordered by The House of Commons
to be printed 28 February 2005*

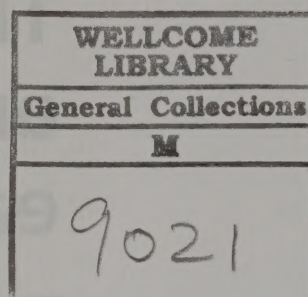
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The Committee of Public Accounts

The Committee of Public Accounts is appointed by the House of Commons to examine "the accounts showing the appropriation of the sums granted by Parliament to meet the public expenditure, and of such other accounts laid before Parliament as the committee may think fit" (Standing Order No 148).

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Mrs Angela Browning MP (*Conservative, Tiverton and Honiton*)
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Rt Hon Alan Williams MP (*Labour, Swansea West*)



The following was also a member of the Committee during the period of this inquiry.

Ms Ruth Kelly MP (*Labour, Bolton West*)

Powers

Powers of the Committee of Public Accounts are set out in House of Commons Standing Orders, principally in SO No 148. These are available on the Internet via www.parliament.uk.

Publications

The Reports and evidence of the Committee are published by The Stationery Office by Order of the House. All publications of the Committee (including press notices) are on the Internet at <http://www.parliament.uk/pac>. A list of Reports of the Committee in the present Session is at the back of this volume.

Committee staff

The current staff of the Committee is Nick Wright (Clerk), Christine Randall (Committee Assistant), Emma Sawyer (Committee Assistant), Ronnie Jefferson (Secretary), and Luke Robinson (Media Officer).

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Summary

The Drug Treatment and Testing Order (The Order) is a community sentence intended for drug misusers who have a significant record of drug-related offending, and it has been used as an alternative to custody. The Order requires offenders to submit to regular drug testing, to attend intensive treatment and rehabilitation programmes and to have their progress reviewed regularly by the courts. Offenders on the Order are supervised by local probation teams. The main requirements of the Order are set by the Home Office and are summarised at **Figure 1**.

The main focus for probation teams to date has been the delivery of annual targets for the number of commencements on the Order. But the main challenge faced by probation teams is keeping often chaotic drug misusers on an intensive and highly structured programme long enough to achieve sustained reductions in drug misuse and offending behaviour. Only 28% of around 5,700 Orders terminated in 2003 had reached full term or had been revoked early for good progress, with significant variations in completion rates around the country. The National Offender Management Service report, however, that offending is reduced for each week an offender is kept on the programme.

Local probation and drug treatment teams have adopted a wide variety of different approaches to delivering the main requirements of the Order ranging from how they select offenders for the Order, the content and quality of rehabilitation programmes provided, such as education programmes, and their approach to enforcement. The methods adopted locally are likely to have an important influence on how effective programmes are in keeping offenders on the programme, but better data is needed to pinpoint which methods work best. Some areas have had difficulty fulfilling the main requirements of the Order. Only 44% of cases monitored by probation areas between July and October 2003 showed evidence that the minimum of 15 contact hours per week during the first 13 weeks of the Order had been arranged.

Some offenders have commented on the difficulty of breaking a drug habit if they continue to live in accommodation shared with other drug misusers, and some have reported difficulties in obtaining benefits such as Job Seekers' Allowance whilst on the Order. Other offenders, who have made progress on the Order, have reported concern about the level of support available when they come off the Order.

Figure 1: Key elements of the National Standard for the management of the Drug Treatment and Testing Order

Assessment	Assessment of suitability for the Order should usually be part of the pre-sentence report. Where assessment needs to be completed after presentation of the pre-sentence report to the Court this should be done within 5 working days.
Supervision and treatment	<p>After an Order has been made by the Court, the offender's first appointment with the Probation Service shall be arranged to take place within one working day and with the treatment provider within two working days of the Order.</p> <p>Contact, including treatment, for the first 13 weeks of the Order shall usually be on five days a week for a total of twenty hours a week, with a minimum of 15 hours a week and after the first 13 weeks, this may be reduced to a minimum of three days a week, for 12 hours a week, with a minimum of 9 hours a week. Contact with the offender should include treatment, offence focused work and lifestyle programmes.</p>
Testing	<p>For the first 13 weeks of the Order, the offender must be tested at least twice a week, thereafter at least once a week. If the offender admits in writing to having used drugs recently, testing shall not always be required.</p> <p>Positive drugs tests should be confirmed through laboratory testing unless the offender admits to drug use.</p>
Court reviews	<p>Probation areas are expected to propose to courts that Court reviews take place once a month for the first four months and quarterly thereafter.</p> <p>Supervising officers must provide a report to the Court on the offender's progress, including the results of drug tests, the views of treatment providers, the offender's attendance record, and the supervisor's assessment of the offender's attitude and response to the Order.</p>
Enforcement	<p>Breach action may be taken after once unacceptable failure and if not the offender must be given a formal warning.</p> <p>Breach action must be taken following the second unacceptable failure in any 12 month period.</p>

Source: National Audit Office summary of National Probation Service, PC25/2001 National Standard for the Drug Treatment and Testing Order

On the basis of a Report by the Comptroller and Auditor General,¹ we examined the National Probation Directorate and the National Treatment Agency for Substance Misuse on the impact of the Order, improving the delivery of the Order, and reducing the risk of relapse.

We also visited the West London Drug Treatment and Testing Team, based in West Ealing, on 11 May 2004.

1 C&AG's Report, *The Drug Treatment and Testing Order: early lessons* (HC 366, Session 2003–04)

Conclusions and recommendations

Part 1: The impact of the Order

1. To confirm the Drug Treatment and Testing Order's suitability as one option for sentencing offenders who misuse drugs, **the National Offender Management Service should undertake research on the outcomes** for those who have been subject to an Order to identify the impact on reconviction rates and on reducing drug misuse, and to identify factors which contribute to a successful outcome. Evaluation of early pilots of the Order found **80% of offenders had been reconvicted within two years**, but for those who completed the Order the reconviction rate dropped to 53%. Completion rates vary significantly, however, across the country, from 8% in Kent to 71% in Dorset.
2. In view of the significant variations in completion rates and their potential impact on the successful rehabilitation of the offender, **the National Offender Management Service should reconsider its target setting to place less emphasis on the number of commencements and more emphasis on the achievement of successful outcomes.**

Part 2: Improving the delivery of the Order

3. An emphasis on commencements may encourage use of the Order in inappropriate circumstances, and for offenders whose aim is largely to avoid imprisonment with little real intention of engaging with the Order. **Better use should be made of the time between arrest and sentence to assess an offender's suitability for the Order and to build and sustain his or her motivation to engage with the Order.**
4. Content of local programmes has been left to the discretion of local probation teams by the National Offender Management Service and hence the types of activity offered vary significantly across the country. **Local programmes should focus on educational and vocational training to raise basic skill levels, and to increase offenders' opportunities to gain employment.**
5. **The National Offender Management Service should monitor the performance of local probation teams in delivering the number of contact hours with offenders expected by the courts and set down in Home Office guidelines.** Where performance falls short of the required minimum of 15 hours per week in the first 13 weeks, and 12 hours thereafter, the Service should explore why, and take action with the local team to resolve any difficulties such as staff shortages or accessibility of treatment.
6. **The National Offender Management Service should make sure that a consistent approach to enforcement of the Order is taken across the country to maintain the credibility of the Order as an effective punishment with local communities.** The Service should also seek to reduce the costs and time associated with breach activity by streamlining the paperwork required so this does not act as a disincentive to probation teams to take timely action.

Part 3: Reducing the risk of relapse

7. **The National Offender Management Service should work with local housing agencies and the voluntary sector to enable those offenders making progress to break free of a lifestyle which might draw them back into criminal behaviour.**
8. **The National Offender Management Service and National Treatment Agency for Substance Misuse should have effective arrangements in place to maintain support and treatment for those coming off the Order, for example through protocols agreed by probation and drug action teams. Research by the Department of Health² has shown that it can take many years to give up drug misuse, so drug misusers are likely to require treatment and support over a sustained period before they achieve abstinence.** Around 71% of current Drug Treatment and Testing Orders are, however, intended to last around twelve months, and some as little as six months. Continued support and treatment beyond the term of the Order may be critical to ultimate success.

1 The impact of the Order

1. The Drug Treatment and Testing Order is a community sentence introduced in the Crime and Disorder Act 1998. The Order is intended for drug misusers who have a significant record of drug-related offending. The Orders run for a minimum of six months up to a maximum of three years. The average term imposed by the courts in many areas is 12 months. Offenders on the Order are supervised by local probation teams and attend drug treatment and other programmes delivered by probation services, other statutory providers or the voluntary sector. In 2003–04, the Home Office allocated £53.7 million to probation areas and treatment services in support of the Order in England and Wales. Since June 2004, the probation service has become part of the National Offender Management Service, which also incorporates HM Prison Service. The National Offender Management Service and National Treatment Agency for Substance Misuse have joint responsibility for overseeing delivery of the Order in England. In Wales, the National Offender Management Service works with the National Assembly to oversee the Order.

2. The Order is intended to reduce crime and drug dependency, with the eventual aim of weaning offenders off drugs permanently. In October 2000 prior to its introduction across England and Wales, the Order was piloted by the Home Office in Croydon, Liverpool, and Gloucestershire. An evaluation of the pilots found that 80% of offenders traced from the original sample had been reconvicted in the two years after commencement of their Order. The reconviction rate for those who had completed the Order was, however, significantly lower at 53%. The rate amongst those failing to complete the Order was 91%.³

3. The main focus for probation teams has been the delivery of annual commencement targets. The Home Office set a target for the National Probation Service to achieve approximately 6,000 commencements a year with effect from April 2001, and doubled the target in December 2002 to achieve 12,000 commencements a year by March 2005. Since April 2004, however, the Home Office had set a new target to increase the number of successful completions on the Order to shift the focus towards outcomes. The effectiveness of the Order depends on the extent of reductions in offending and drug misuse achieved. Probation areas had reported that offenders were achieving reductions in their drug misuse, but data to support these views had not been collated by all areas. The National Offender Management Service believed that some of the information on reducing drug misuse would begin to become available but acknowledged that further research would be needed to determine the longer term impact of the Order on reconviction rates.⁴

4. Only 28% of around 5,700 Orders terminated in 2003 had reached full term or had been revoked early for good progress. The majority of terminated Orders were attributable to the offender's failure to abide by the terms of the Order (44%), conviction for another offence (22%), or for other reasons, including ill health or death (6%). The National Offender Management Service suggested that the completion rate of 28% was not unreasonable when set against the challenges posed by offenders with a history of serious drug misuse and a significant record of drug-related offending. In its view, the Order

3 Qq 9, 34, 44, 75

4 Qq 11, 83

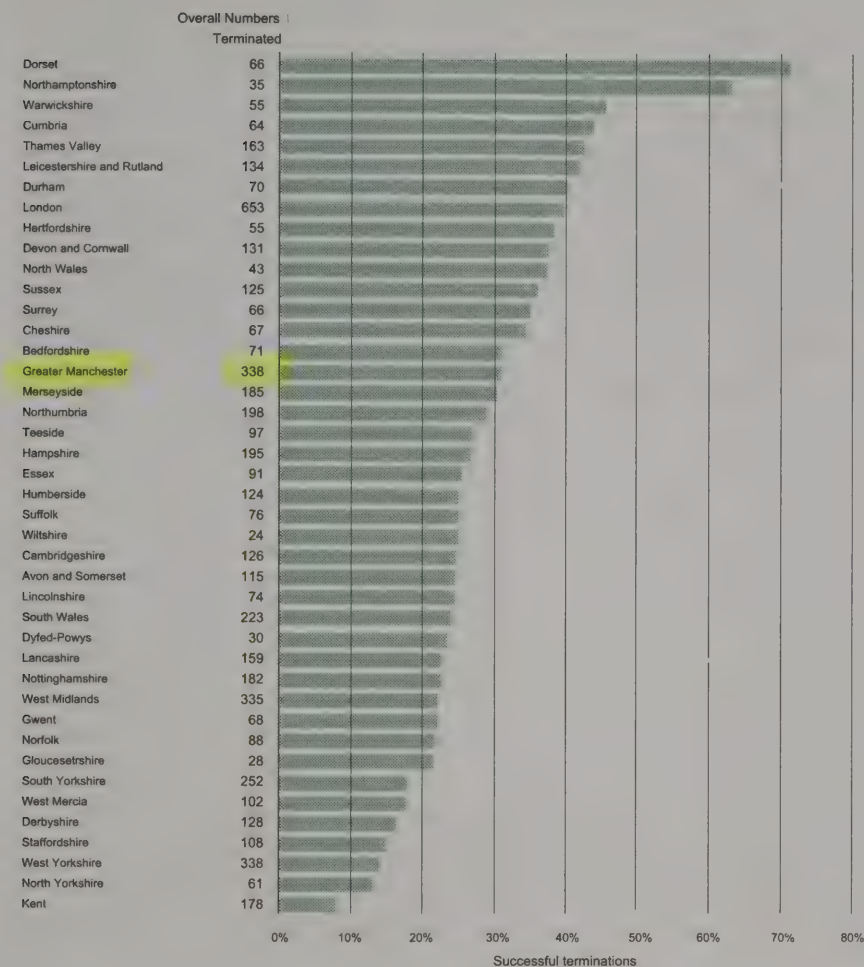
placed great demands on people who often led chaotic lives, and inevitably some found it difficult to stay the course.⁵

5. Completion rates and early terminations due to good progress have varied significantly between probation areas (**Figure 2**), ranging between 8% in Kent to 71% in Dorset in 2003. Local completion rates reflected a variety of factors, including the type of offenders placed on the programme and different approaches adopted by local courts towards breach and revocation. The variations also reflected different approaches to treatment and rehabilitation. The National Offender Management Service reported that Dorset, for example, had tended to put people on the Order for six months – compared to twelve months in many areas – and had placed everyone on the Order in a hostel. The Service recognised the need to improve completion rates across the country by sharing good practice and it was looking at those areas with high completion rates to see what lessons could be learned. The Service suggested that activities provided alongside treatment, such as basic skills courses to make people more employable, would help to improve completion rates.⁶

5 Q3; C&AG's Report, para 3.3

6 Qq 2, 7, 35, 92; C&AG's Report, para 3.10

Figure 2: Completed Orders and early terminations due to good progress as a percentage of all terminated Drug Treatment and Testing Orders in 2003



Note

The figures for completed Orders and early terminations due to good progress include cases where the Order expires whilst the offender is in breach and the Order is not formally revoked by the courts, for example where a warrant to attend court is outstanding. In two areas visited which had kept this data they accounted for 17% of completed cases to June 2003 (Leicestershire) and 25% in the first quarter of 2003–04 (London).

Source: National Audit Office analysis of National Probation Directorate data

6. Some completion rates reported by local teams had overestimated the proportion of Orders completed successfully. In some instances, the figures had included cases where the Order had expired whilst the offender was in breach but the Order had not been formally revoked by the courts, for example where a warrant to attend was outstanding. In Leicester, these cases accounted for 17% of completed cases between January and June 2003, and 25% of cases in London in the first quarter of 2003–04. The Service acknowledged that some

overestimates had occurred but reported that such cases would be removed from future figures.⁷

7. The cost per Order of around £6,000 compares to the average cost of £30,000 for a prison place per year. This estimate, however, includes the cost of those who fail to complete the Order. If costs are attributed only to successful completions, the cost per successfully completed Order rises to around £21,000. The National Offender Management Service argued that this estimate failed to recognise that benefits from reduced drug misuse were often derived even though offenders did not complete the Order. In its view, the Order offered the advantage of providing treatment in the community. It suggested by contrast that offenders leaving custody often spent their discharge grant on heroin the day they went back into the community. Nevertheless, the costs associated with achieving a successfully completed Order confirm the need to increase completion rates and to measure whether those coming off the Order early sustain any reduction in drug misuse.⁸

7 Qq 82, 84

8 Qq 43, 58, 62, 67

2 Improving delivery of the Order

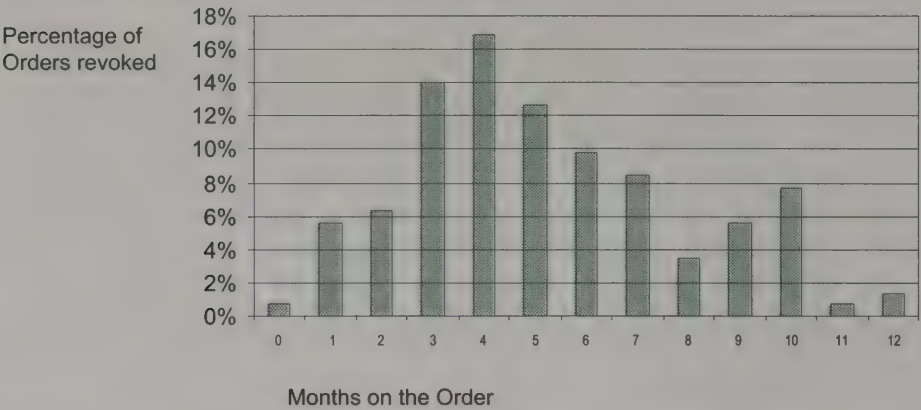
8. Over half of offenders referred by the courts for assessment by probation and treatment teams had not been found suitable for the Order. This figure included some 30% who had not been assessed because they excluded themselves or who had been considered unsuitable without assessment. The reasons for unsuitability could include a history of violence which might pose a risk to staff and other people on the programme; offenders whose offence was not necessarily associated with their drug habit; those who are not sufficiently motivated to embark upon the programme; and those who, in the view of probation and drug treatment staff, did not have a sufficiently entrenched habit to justify a place on the Order.⁹

9. The methods adopted for selecting potential candidates for the Order varied significantly between probation areas, from a single interview to a more detailed assessment of offenders' needs prior to their joining the programme. As already noted, a significant proportion of offenders on the Order drop out at an early stage despite this selection process. Leicestershire was one of the few areas to have kept information on retention periods at the time of the National Audit Office review. Here, almost 50% of offenders had dropped out of the Order within four months, with some dropping out within weeks of starting (**Figure 3**). Offenders we met suggested that some drug users tried for a place on the Order simply to avoid or delay being sent to prison. The National Offender Management Service agreed that there were difficulties in assessing motivation amongst such a highly problematic group of drug misusers, but suggested that those without commitment were quickly brought back to court. The Service could not describe the characteristics of an offender more likely to stay on the Order but considered that improvements in the selection process were being made as a result of enhanced information about the offender prior to sentence.¹⁰

⁹ C&AG's Report, para 2.12

¹⁰ Qq 4, 6, 75; C&AG's Report, para 3.11 and Figure 19

Figure 3: Length of time served on an Order where the Order was revoked for failure to comply or conviction for another offence in Leicestershire up to 30 June 2003



Note: Excludes revocations after 12 months, because of the low number of offenders on Orders longer than 12 months.

Source: National Audit Office visit

10. The National Offender Management Service suggested that offending is reduced for each week an offender is kept on the programme. Keeping offenders complying with the Order for its duration was key to achieving successful outcomes. Data from Leicestershire probation area indicated that many offenders in the county left the Order between the third and sixth month (Figure 3). The Service explained that at this point the difficulties faced by offenders in maintaining progress whilst coping with the other pressures in their lives often began to impact. Better data was, however, needed to examine whether this pattern was repeated in other areas. The Service had recently started tracking the time offenders stay on the Order through the three month, six month and twelve month points. It planned to use this information to better understand why offenders stayed on the Order and to draw upon the experience of those probation and treatment teams who were having more success. A new offender assessment system was being introduced across the prison and probation services, known as OASys, which should assist with this analysis. The lessons learned would help the design of local programmes and inform the selection of offenders for the Order.¹¹

11. The majority of probation areas have had difficulty meeting the number of contact hours with offenders expected by the Home Office. Only 44% of cases monitored by probation areas between July and October 2003 showed evidence that the minimum of 15 contact hours per week during the first 13 weeks of the Order had been arranged. This figure rose to 69% after 13 weeks when 12 hours of contact time per week were expected. Similarly, over the same period, only 13% of cases showed evidence of two or more drug tests each week in the first 13 weeks of the Order. 29% of cases had undertaken one test or more in subsequent weeks as required by the National Standard. The National Offender Management Service reported that probation areas had needed to build up their capacity to offer the programmes as well as the treatment services provided via the drug action teams. It acknowledged that improvements were needed.¹²

11 Qq 11, 34, 49, 76–77, 79; Ev 15

12 Q 7

12. There are significant differences across England and Wales in the type of activities offered by local probation teams to make up the required number of contact hours. These activities ranged from learning basic literacy and numeracy courses to advice on employment and training, visits to the gym, and learning life skills such as cooking and budgeting. The National Offender Management Service had left decisions about the content of local programmes to the discretion of local teams as it considered that this approach enabled local probation teams to better match programmes to offenders' needs. The content and quality of local programmes played an important part in supporting offenders through their treatment and to gain employment. The Service was seeking to introduce more basic skills training, advice on obtaining employment and other support.¹³

13. Home Office guidelines stipulate that offenders who fail to abide by the terms of the Order will be breached by the Probation Service and brought back to court. These hearings are in addition to periodic reviews undertaken by the courts to examine an offender's progress on the Order. Senior probation officers interviewed by the National Audit Office were concerned that the cost of enforcing the Order was expensive and time consuming. Servicing the needs of the courts, together with the associated paperwork could therefore discourage probation officers from reporting breaches. The National Offender Management Service noted that in 2003, there had been 86 breaches for every 100 starts on the Order and cited the breach rates as evidence of the enforcement action being taken. Some staff might resist a rigorous approach to enforcement but the Service believed most staff supported the approach advocated.¹⁴

14. The number of offenders and the number of drug misusers per head of population varies significantly from area to area and funding for local probation and treatment teams ought to reflect local needs. The National Offender Management Service recognised that some areas might need to spend more on treatment for example, because of the mix of local users, but it considered the distribution of resources to local probation teams to be reasonably equitable based on local crime levels. Funding for treatment services was distributed to drug action teams by the National Treatment Agency for Substance Misuse using a formula that reflected a number of indices of social deprivation including the prevalence of drug misuse. The formula had been revised to more closely reflect need with the result that some resources would shift, in general, away from the South and West towards the North and East over a three year transition period between 2004 and 2006. The budgets were allocated in advance each year based on the expected number of commencements. The Service reported that from 2004–05 probation teams would be awarded additional money if they met their completion targets to provide probation teams with a sufficient incentive to get people through the programme.¹⁵

¹³ Q 14; C&AG's Report, paras 3.21–3.25

¹⁴ Qq 3, 50–51, 68, 86, 96

¹⁵ Qq 35, 37–39, 89, 91; Ev 15

3 Reducing the risk of relapse

15. The National Treatment Outcome Research study commissioned by the Department of Health had found that about 40% of people treated in residential or community methodone programmes in 1995 were still using heroin at least once a week four to five years later. Most drug misusers are therefore likely to require treatment and support over a sustained period before they achieve abstinence.¹⁶

16. Around 71% of current Drug Treatment and Testing Orders are intended to last around twelve months and, in some areas, Orders frequently last as little as six months. Taken on their own therefore, Orders may not be long enough to achieve sustainable change. The National Treatment Agency for Substance Misuse had significantly expanded the availability of drug treatment in the community over the last two years and aimed to provide a seamless treatment service irrespective of the outcome of the Order. Offenders interviewed by the National Audit Office were concerned that treatment and support available beyond the end of the Order would not be of sufficient intensity to enable them to sustain their progress. The Agency was confident that treatment would be continuous in this context. It assigned caseworkers to all drug misusers to provide advice and support even after the offender had come off drugs, to see them through times when they might be particularly vulnerable to relapse.¹⁷

17. Some of the drug misusers we interviewed had experienced practical problems that might, if unaddressed, hinder their progress on the Order. Some for example, had experienced delays in obtaining Job Seekers' Allowance whilst on the Order. The Service recognised that other agencies had a significant part to play in helping people on the Order sort out their lives. It was working with other agencies to address these issues. It had not been aware of the difficulties faced by some offenders in claiming benefits but undertook to raise the issue with JobCentre Plus, the agency responsible for paying the Job Seekers' Allowance.¹⁸

18. Offenders we met had experienced difficulties in obtaining accommodation away from their drug misusing peer group, and some offenders interviewed by the National Audit Office were homeless. The Service had sought to increase access to hostel places but had difficulty in obtaining planning permission for new facilities. Probation teams tried to find suitable accommodation for people on the Order, although the Service had no evidence that offenders had been allowed to jump existing housing queues. The National Offender Management Service was working with the Office of the Deputy Prime Minister to improve access to housing and had also held discussions with the Local Government Association. Its aim was to convince other departments and agencies that the more they could help with resettlement the greater the impact on reducing reoffending.¹⁹

16 Q 9

17 Qq 8–9, 84–85

18 Qq 12–13

19 Qq 12, 36; C&AG's Report, para 3.22

Formal minutes

Monday 28 February 2005

Members present:

Mr Edward Leigh, in the Chair

Mr Richard Bacon
Mr Brian Jenkins

Mr Gerry Steinberg
Mr Siôn Simon

The Committee deliberated.

Draft Report (The Drug Treatment and Testing Order: early lessons), proposed by the Chairman, brought up and read.

Ordered, That the draft Report be read a second time, paragraph by paragraph.

Paragraphs 1 to 18 read and agreed to.

Conclusions and recommendations read and agreed to.

Summary read and agreed to.

Resolved, That the Report be the Ninth Report of the Committee to the House.

Ordered, That the Chairman do make the Report to the House.

Ordered, That the provisions of Standing Order No. 134 (Select Committees (Reports)) be applied to the Report.

[Adjourned until Wednesday 2 March at 3.30pm]

Witnesses

Monday 17 May 2004

Page

Mr Martin Narey, National Offender Management Service, **Mr Paul Hayes**,
National Treatment Agency for Substance Misuse, and **Mr Stephen Murphy CBE**,
National Probation Service for England and Wales

Ev 1

List of written evidence

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Ev 15

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Ninth Report	The Drug Treatment and Testing Order: early lessons	HC 403

The reference number of the Treasury Minute to each Report will be printed in brackets after the HC printing number

Oral evidence

Taken before the Committee of Public Accounts

on Monday 17 May 2004

Members present:

Mr Edward Leigh, in the Chair

Mr Richard Bacon
Mrs Angela Browning
Jon Cruddas
Mr Brian Jenkins

Jim Sheridan
Mr Gerry Steinberg
Jon Trickett
Mr Alan Williams

Sir John Bourn KCB, Comptroller and Auditor General, National Audit Office, further examined.

Mr Brian Glicksman, Treasury Officer of Accounts, HM Treasury, further examined.

REPORT BY THE COMPTROLLER AND AUDITOR GENERAL:

The Drug Treatment and Testing Order: early lessons (HC 366)

Witnesses: Mr Martin Narey, Chief Executive, National Offender Management Service, Mr Paul Hayes, Chief Executive, National Treatment Agency for Substance Misuse and Mr Stephen Murphy CBE, Director General, National Probation Service for England and Wales, examined.

Q1 Chairman: Good afternoon, welcome to the Committee of Public Accounts, where today we are dealing with the Drug Treatment and Testing Order (DTTO). We are joined by Mr Martin Narey, who is Chief Executive of the National Offender Management Service, you are very welcome, by Mr Paul Hayes, who is Chief Executive of the National Treatment Agency for Substance Misuse and by Mr Stephen Murphy, who is Director General of the National Probation Service for England and Wales. You are all very welcome. May I thank you, Mr Narey and gentlemen for allowing Mrs Browning and myself to visit a drug treatment centre last week, which we found very interesting? Certainly this type of visit much informs our work, everybody was very kind to us and it was very interesting; not least the people attending the course.

Mr Narey: I am very pleased.

Q2 Chairman: May I ask you to look at page 28 and Figure 18 which relates to paragraph 3.10, which you can find on page 27? If you look at that graph on page 28 you see an extraordinary difference in the completion rates; over 70% achieved by Dorset going down to as little as 8% in Kent. Kent does not immediately leap to mind as one of the most difficult areas in the country. Perhaps you could explain to us why all probation areas cannot achieve the kind of completion rate that we see in Dorset?

Mr Narey: I shall try, without being too lengthy in my answer. There are several reasons. If I may use Dorset, whose performance is exceptional, there are several reasons for that. The Orders they use in Dorset are usually only for six months and they are able fortuitously to offer everybody on a DTTO a place in a hostel and there is a real learning experience there in terms of getting people through to the end. Kent by comparison has rather longer Orders. They would argue and have argued that they

have very rigorous enforcement, certainly evidence from the courts is that the courts are much less tolerant of failure on this Order in Kent and that and a number of other reasons,¹ not least the different nature of people coming on the Order, is why there is a variation. I am not trying to suggest that such a variation is justified and it is vital that we get that bottom tranche of areas much more up into the middle ground.

Q3 Chairman: I suppose perhaps the very first question I should have asked was notwithstanding that everybody we met last week looked very keen to finish the course, by definition of course, because they had turned up, one does not always know whether the people you meet on these occasions are the ones who are keenest or not. Nationally we know from this Report that only 28% finished the course, which is very low. Why so low?

Mr Narey: It is low because it is such a formidable challenge to get young people, leading utterly chaotic lives, through to the end of a very demanding Order. I think the 28% completion rate in part says something about the radical way the Probation Service has transformed its approach; to enforcement: 86 out of every 100 Orders result in some sort of breach action, not necessarily the finish of the Order. It is very, very tightly policed now in a way that probation orders were not some years ago. The main issue is just the challenge of these individuals. Like you I have spent quite a bit of time around the country speaking to people on the Orders

¹ *Note by witness:* Kent are linked with the local Police who provide intelligence about their offenders on orders. Also, one part of Kent (Mid Kent), which covers about 20% of the target population, delivers the only abstinence based services for DTTOs. This means that if offenders provide positive tests they are not able to continue in treatment and cannot complete the order.

17 May 2004 National Offender Management Service, National Treatment Agency for Substance Misuse and National Probation Service for England and Wales

and frankly—I do not want to open myself up to more criticism from the Committee—sometimes I think that 28% completion rate is not unreasonable when set against the challenge we are facing.²

Q4 Chairman: Mr Murphy, we were told last week that a fair proportion of people go on this course simply as a jail-swerve, a get-out-of-jail-free card and they claim to those responsible for them in prison that they do have a drug problem when in fact they do not have a drug problem, they are simply drug pushers. So actually drug pushers are being put on this course with their clients. Is that true? Are some inappropriate offenders placed on this course simply to meet targets placed on you by your political superiors in the Home Office?

Mr Murphy: I would not relate it specifically to pressure for targets. There are particular issues in assessing motivation amongst this target group. With such an intense Order, when we start the Order with such major demands for 20 hours a week contact, it does put great pressure on those individuals leading chaotic lives. Some of them may imagine that this was a jail-swerve—which is a new term for me, but a very descriptive one—but they find very, very quickly that it is an extremely demanding programme if they are to make the changes we demand of them when they start it.

Q5 Chairman: So you were not aware of this apparently common feeling that there are actual drug pushers being placed on this course with their clients.

Mr Murphy: Drug pushers of course are often users themselves.

Q6 Chairman: We were told that increasingly they are not, as it happens.

Mr Murphy: My experience is that both people who deal and people who take will find themselves on the programmes and the programme can work for both. Equally the phenomenon of jail-swerving is well known. People do not want to go to prison if they can avoid it. Part of the skill of the staff involved in the programme is trying to identify people's real motivation and then working with them according to their assessed need.

Q7 Chairman: If we look at page 30 now and paragraphs 3.18 and 3.19 it says at the beginning "The majority of probation areas have had difficulty fulfilling the required number of contact hours" and some areas indeed are failing to deliver the required hours. How do you explain this failure? Does it worry you?

Mr Narey: Yes, it does worry me and it would worry me very much if we were not able to improve it. We have seen some improvement since then; after the

initial weeks of the Order about 69% of Orders are fulfilling the number of contact hours at the moment. We needed to build up capacity in the Probation Service to provide the things which we need to do with offenders. This is not just about clinical treatment, for which the NTA are responsible; it is about doing other things with them. For example, this year we are spending an extra £10 million on basic skills education for offenders under the supervision of the Probation Service. An awful lot of that time will go on those on DTTOs. I do think we will have a greater availability of things in which to deal with offenders, but I accept entirely that we shall have to improve the number of contact hours that the NAO Reports.

Q8 Chairman: Mr Hayes, could I please ask you to look at page 34 and paragraph 3.30, where it says "Drug treatment workers we interviewed reported concerns amongst some offenders nearing the end of their Order about their ability to sustain their progress without sufficient support". How do you ensure that you maintain the benefits after this course ends?

Mr Hayes: The first thing we have to do is make sure that those who still require treatment can still receive it and there have been very significant strides since this Order was first introduced to make sure that the entirety of treatment systems across the country, not just those used by offenders, not just those used by DTTOs, are able to retain people for as long as possible, which maximises their opportunity to benefit from it. They are also able to be referred onto what in the jargon is called wrap-around services, employment, education, housing, etcetera, to make sure they have the social support they need in order to make the best advantage of the treatment they have received.³

Q9 Chairman: Can I ask you to comment on this, Mr Narey? If you look at paragraph 3.5 on page 26, you will see there that it expresses some doubt as to whether these Orders are too short. Obviously we know that people can take years to overcome their addiction. Are these Orders simply too short to have any lasting effect?

Mr Narey: I do not believe so. I think about 71% of the Orders are for about 12 months; that seems to be the norm. I think one can make a lot of progress in 12 months. The nature of the individual we are dealing with on these orders is that they may fail repeatedly before they finally make a success and stay off drugs permanently. My experience of

² Note by witness: DTTOs are targeted at serious and persistent drug misusing offenders with entrenched patterns of drug misuse and offending. Notwithstanding this particularly hard to treat group, the drop out rate from DTTOs is similar to the rate of drop out from drug treatment generally.

³ Note by witness: Development of a "Throughcare" system, for managing the continuity of care provided to a drug misuser from the point of arrest through to sentence, and "Aftercare" provision for drug misusing offenders who have reached the end of a prison based treatment programme, completed a community sentence or left treatment is central to the Criminal Justice Interventions Programme (CJIP), which was launched by the Home Office and National treatment Agency in April 2003. From April 2004, funding has been made available to all DATs for phased implementation of throughcare and aftercare across England and Wales.

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speaking to lots of young people on these Orders is that through the Order they are typically still taking drugs, that abstinence is beyond them; they are usually taking significantly fewer drugs and they are making some progress towards eventual abstinence. I do not think the solution is to have longer Orders. One has to be realistic that individuals might fail the Orders on two or three occasions before you might finally be successful with them.

Q10 Chairman: Mr Murphy, if you look at paragraph 3.2 on page 23 you will see it says there "Whilst the Home Office has set targets for the number of commencements on the Drug Treatment Testing Orders, it did not initially set any expectation for the proportion of Orders to be successfully completed, or otherwise define how success might be measured". I think this is quite a crucial point, is it not?

Mr Murphy: Yes, it is.

Q11 Chairman: There is no point in going through the motions, having these people on this course—we know that only 28% complete it anyway—if we have no real idea how successful you are going to be in the long term.

Mr Murphy: Yes. We have introduced a compliance target from April this year to raise that figure from 28% to 35%, which in itself is a 25% increase and we are monitoring retention at three months, six months and 12 months to give us more data about how people are engaging with the orders so that we can learn from that and improve our skills at retaining people in the Orders.

Q12 Mrs Browning: May I say first of all that having visited the Ealing centre I like this programme, but I think it is fraught with quite a lot of problems which need to be addressed if it is ultimately going to be a successful programme. The principle of it is good, primarily because the persistent drug users are taken through the process of moving on to methadone and then actually the process takes them off methadone, as opposed to many other short-term treatments we have seen over the years which are just a short-term fix. The potential for it is extremely good, but there are some practicalities associated with it which I do not think allow the scheme to work well. I wonder whether you could comment on them. One of the things we were told when we went to Ealing last week was that a lot of the people on the programme still have very practical problems with third party agencies with whom I would have hoped the statutory services would have been in touch so that they too had a better understanding of what this programme entails. For example, we spoke to one young man who had recently come on the programme who had been without any money for three weeks because he had a benefits problem. You have already outlined that the Dorset programme is successful because they are able to offer hostel places and again the question of having a secure roof over their head when they start the programme clearly must affect whether they are going to make a success

of that programme or not. In some cases, in some boroughs of the clients attending that centre, the borough seems to have addressed the housing issue and understood the importance of it to this particular group. Others, who happen to come from another borough, did not have the same sort of support. There was a GP, for example, who did not understand that somebody on the programme cannot be actively looking for work and therefore is entitled to be on incapacity benefit, but who queried the writing of the incapacity benefit scrip in order for him to present that to the DWP. It just seems to me that if you are going to make a success of this, it is absolutely imperative that at a local level all these third parties, who have a need to know at least in principle how the scheme is working and what the entitlements of the people on it are, should at least be advised or there should be somebody capable of troubleshooting on behalf of the client. I just wonder how those sorts of very practical problems have played into the fact that there is such a fall-off in the early weeks. I am sorry, that is a lot all in one, but they are all inter-related.

Mr Narey: I shall try to cover that. I am very grateful for your opening comment and I share your optimism about this Order. I think it is something which potentially can be dramatically effective. You are right about the contribution of other agencies and if one takes accommodation and the example of Dorset, it is quite clear what one can achieve. Other areas do not have the advantages of being able to offer hostel accommodation and frankly it is probably easier for me to get planning permission for a prison these days than it is for another hostel. So it is very difficult to increase that significantly, although we are very slowly. What I try to do at the centre, in terms of trying to manage re-offending and all the things prisons and probation are doing, is try to get other departments involved and I have been extremely encouraged by, for example, the support of the Office of the Deputy Prime Minister in trying to take a lead on improving our access to housing or making sure that offenders are not squeezed in the allocation for supporting people budget. I have had some discussions with the Local Government Association who are being very encouraging and I think are beginning to realise that the more they do to help resettlement and help with accommodation, the less likely it is that people are going to be coming back to their areas and burgling. There is some evidence that people's accommodation status improves while they are on this Order, but I accept entirely that we have a major hurdle to overcome. Many people on this Order are living in temporary accommodation, sleeping on people's sofas and, as the NAO found out, on some occasions sleeping in crack houses and we need to get them over that. We are on the case of accommodation. To be absolutely frank, until I had had a report on your and the Chair's visit last week, no-one had raised with me on a succession of visits the benefit problem. This was quite new to me and I am very much alarmed to have somebody not on our Jobseeker's Allowance because they are on a DTTO. Clearly it is insane. In

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the wider management of re-offending I have very good relationships with the Chief Executive of JobCentre Plus, who ironically has just sorted out a very similar problem for me, to ensure those people being sentenced to intermittent custody can continue to get benefits. This is a new experiment with weekend custody. I shall take this up immediately with him and do everything I can to ensure this does not continue.

Q13 Mrs Browning: I am delighted to hear that because I think both the Chairman and I, when we were presented with this benefits problem, looked at it in the same way we would any benefits problem which came across our desk any week, which our case workers would have solved before the end of the week. I just wonder whether you think on these very practical issues—I am sorry to labour the point but I actually think it is fundamental to how successful these sorts of schemes will be, because clearly if people cannot get access to benefits properly, we have discussed the housing situation, then their state of mind is not going to be such that they are going to be terribly receptive to becoming a full participant in the scheme from day one and that is what you actually want, to maximise that opportunity from day one. I just wonder what you are going to put in place over and above that particular issue which we identified. I know the staff there are working very hard, but is there not some form of feedback, whereby it does not take a parliamentary visit to identify that these are practical problems specifically to do with people on the scheme? Can members of staff not have some sort of one-stop-shop hotline where they can feed back through, so they do not have to spend hours and hours of their valuable time trying to troubleshoot these problems, but somebody at the centre can take some responsibility for it and deal with it? Is that not the sort of facility which should be available to the staff running those centres?

Mr Narey: Yes, it is and we are open to that sort of contact. The point I was stressing, and I am embarrassed that you should pick it and I did not, was that I do not think the benefit problem is very prevalent. Mr Murphy, who until very recently was managing a probation service, has not come across this. It is clearly there and some investigation has found that it is not just in one area of the country. I need to make sure, first of all that people bring forward those comments, and they do on a whole range of other things to do with the Drug Treatment and Testing Order. I need to make sure or do my best to persuade JobCentre Plus to give central guidance to their officers that being on a Drug Treatment and Testing Order should not be a basis for refusing Job Seeker's Allowance. My experience in sorting this out for intermittent custody encourages me to think I shall be able to do that.

Q14 Mrs Browning: May I just ask you about restricted activities on the scheme. We have seen in the Report reference to this and it was something which was raised with us as well. There does seem to

be quite a national variation on the type of activities people engage in while they are on this scheme. You have clearly identified in the Dorset figures that Dorset have been successful, one of the reasons being primarily their ability to deal with the housing problem, but how are you going to bring up the standard and the opportunity of all of these schemes? How are you identifying best practice in terms of the activity mix of the scheme?

Mr Narey: We try to give areas the discretion to decide what is appropriate for an individual offender, so the package, over and beyond what you might call the clinical treatment, varies considerably, depending on the individual. I have seen quite recently at Southampton, for example, a quite significant number of young women on the DTTO, all of whom were spending quite a large part of their time doing basic skills because they were unemployable and had made very significant progress. In other areas of the country, people have been directed towards cognitive skills programmes because it had been thought that was the main challenge for them in terms of trying to curb impetuous behaviour. My view is that it is right to leave a lot of discretion open to local offices to determine what an individual needs, because it varies considerably. Although I am delighted at what has happened in Dorset and I have been to Dorset and seen what has happened there, actually to be honest their approach is not of itself sustainable because they are putting everybody on a six-month rehabilitation programme which must mean there will be some people in Dorset who do not need that, but who are being picked up by the DTTO.

Q15 Mrs Browning: I am concerned that the scheme appears to be focusing on input targets, particularly with the increased numbers and the target set for 2005. What can you tell us about what you are going to do about output targets?

Mr Narey: First of all, we are going to do everything we can to make sure that a significantly greater number are completed. We have a great deal of output evidence. We know from the South Bank University research into the pilots that re-offending while people were on the DTTO was perhaps 75% lower. I am in no doubt at all that every week we keep someone on one of these programmes we are significantly reducing the amount of crime. We need to find a way of measuring that so that we can report it.

Q16 Jim Sheridan: I work on the assumption that we have equivalent organisations in Scotland.

Mr Narey: No, I do not think we have this.

Mr Murphy: There is no Probation Service as such in Scotland and the equivalent Orders are run by the social service departments who tend to have criminal justice specialists within them.

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Q17 Jim Sheridan: I am conscious that drug users, in particular drug pushers, do have a record of moving about the country. How do you evaluate the success or lack of success of the programmes if they move from England to Scotland or to Wales?

Mr Narey: In terms of their re-offending, we use the police national computer and we have just made some important progress to get information from that much more quickly than hitherto. We shall be able, from this year on, to measure things not just like re-convictions but re-arrest, being charged again for individuals and we shall be able to trace them wherever they are in the country.⁴

Q18 Jim Sheridan: In terms of treatment alone, how do we know that they are complying with treatment programmes? I assume you do not have any access to medical records to see whether or not they are still getting treatment for their misuse of drugs or whatever.

Mr Narey: Do you mean after the Drug Treatment and Testing Order is finished?

Q19 Jim Sheridan: Yes.

Mr Narey: Paul, what access do we have in terms of ongoing treatment after the Order is finished?

Mr Hayes: There is access to treatment after the Order has been completed. What we are not yet able to do is track those people through to identify which ones actually are in treatment. Once their Orders have been completed, they are being treated as individuals, as any other citizen accessing NHS services, not as offenders.

Q20 Jim Sheridan: So we do not follow that up to see how they are behaving or how they are getting on in life.

Mr Narey: As criminal justice agencies we would not be able to follow that up because it would be confidential between them and the Health Service.

Mr Hayes: They will be followed up by local treatment providers and they will have access to services. What we are not able to do is to track their progress through those services; we have lost the right to do that because they have completed their sentences.

Q21 Jim Sheridan: If someone is a drug taker or a drug dealer in Glasgow and they turn up in London, you will not know that, will you?

Mr Hayes: No.

Mr Murphy: We would know that if they tripped into the criminal justice system again.

Q22 Jim Sheridan: I am not looking in terms of criminal justice, but in terms of treatment. You will not know that.

Mr Hayes: No.

Mr Narey: We would know the extent to which they had co-operated in treatment if they had been on an Order like this, but we would not know if they had just been treated outwith the criminal justice system, no.

Mr Hayes: The treatment provider in London would know from the treatment provider in Glasgow that that individual had been in treatment in Glasgow. What they would not have any obligations to do is to inform any criminal justice agency that they were now in contact with a treatment provider in London.

Q23 Jim Sheridan: In relation to other countries, unfortunately the drug problem is now a global problem. How do these programmes compare with other European countries? Are there any lessons, any best practice we could learn?

Mr Murphy: I am not sure that anybody is very much further ahead than the United Kingdom and certainly this Order applies to England and Wales. We have seen some research evidence from Europe and further afield. This is a fairly bold attempt to try to draw the criminal justice end alongside the health provision end to provide a unified Order. I am not sure that is common anywhere else.

Q24 Jim Sheridan: We are leading the field, are we?

Mr Narey: We are generally seen to be leading the field in this and a number of other approaches to dealing with offenders.

Q25 Jim Sheridan: Is there anything you think that we as legislators could perhaps be doing to help you in your challenging task?

Mr Narey: The statutory arrangements we have for this are fine. One of the greatest challenges is educating commentators including the public and the press about the formidable challenge we face. Unfortunately I have been here a few times and I have dealt with reports much more critical than this; I thought this Report was quite encouraging. It was very significant that the press approached the publication of this Report with absolute horror and said it was a disgrace. I think we need a greater understanding of the complexity of the challenge people face. The probation staff who are working on this are doing generally speaking a pretty remarkable job.

Q26 Jim Sheridan: Do you mean the press are not promoting what you are doing or they are decrying what you are doing, they are negative?

Mr Narey: The press and a lot of the public as well believe that once someone gets engaged in the criminal justice system and is sentenced that individual should be expected to abstain from taking drugs immediately and permanently and I am afraid that just is not realistic. Relapse is the nature of addiction and abstinence is not a requirement of this programme and it would be disastrous if it were.

⁴ DTTOs made in England or Wales cannot be transferred to Scotland.

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Q27 Jim Sheridan: The other problem I find and I am sure some of my colleagues find is that when people who are convicted of drug dealing or drug taking are then given accommodation the local communities say the drug dealers are getting houses ahead of good upstanding people. Do you find that? Is that a common problem?

Mr Narey: Usually the people coming on this programme have not been convicted of drug dealing, they have been convicted typically of burglary, robbery, other acquisitive crimes which they committed to fund the drug habit.

Q28 Jim Sheridan: But they are known in the community as being associated with drugs and in order to help them, we help them get accommodation, sometimes at the expense of someone who is not a drug dealer. I for one have had people in my surgery asking why so and so, a recognised drug dealer in the community, is getting a house and their son or daughter cannot get one?

Mr Narey: I do not think there is much evidence of significant queue jumping in this respect. We try to find housing for them and that is sometimes very difficult and sometimes something which we need to perform on rather better. It is very difficult to find housing or accommodation for this group of people. I have seen very little evidence of queue jumping. Many people on this programme are homeless and will remain virtually homeless for much of the programme.⁵

Q29 Jim Sheridan: Given the immensely challenging job that all three of you have are there any lessons? You talked earlier about educating people. Are there any lessons we can take into the schools? I am aware of the fact that a number of MPs are involved in this exercise MPs Back to School and I am picking up from that that drugs are a big issue for kids. Are there any lessons you can give us as MPs to take into schools on how best not to get involved in this kind of practice?

Mr Narey: My view is that we just need to do everything we can to convince school children and young adults that there is nothing glamorous about taking drugs and people who do take them have lives of utter misery and lose control over their lives, their livelihoods, their families their jobs. There is nothing exciting about it. In some respects there is still a rather exciting allure around drugs which, despite the experience of the last few years we have not been able to remove.

⁵ *Note by witness:* Probation areas are expected to address the accommodation needs of offenders on DTTOs during and after completion of the order. More generally, the Probation Service is contributing to the National Accommodation strategy. This includes a number of short, medium and longer-term actions which will help to ensure that the accommodation needs of offenders are identified at national, regional and local level for planning purposes and that individual offenders are linked to appropriate pathways to secure and sustain accommodation.

Q30 Jon Trickett: I want to start where the Chairman started, Figure 18, page 28. If you look at West Yorkshire, which is my home county, you could argue that it is quite successful. I know many of the workers who are extremely committed and dedicated and professional staff and I could not pay sufficient tribute to the work they do. In fact 338 successful completions is as high as anywhere in the country outside London. On the other hand 85% are not completing the course. Is that a measure really of failure in a sense? It looks as though 1,700 people have not finished the course of treatment, does it not?

Mr Narey: I am afraid that is not what the chart says.

Q31 Jon Trickett: Am I misreading it?

Mr Narey: I too have great admiration for West Yorkshire Probation Service, which I visited just a fortnight ago. These are 338 Orders terminated, not all of them successfully completed; that is the volume of Orders successfully completed and others. The completion rate for West Yorkshire is very low. I know, from speaking to Paul Wilson about this recently, he would say that is partly because they are extremely fierce on breaching and that the courts are perhaps less sympathetic than in other areas of the country to giving somebody a second chance. Frequently, when people come before a court for a breach of the Order they are given a second chance to return to the Order and I favour that; I think it is realistic. Paul Wilson would argue that happens less in West Yorkshire than in any other place.

Q32 Jon Trickett: So I understand the figures, is the 338 the 85% which terminated prematurely or is it the 15% which went through to successful completion?

Mr Narey: Three hundred and thirty-eight Orders were terminated, of which only about 15% were successfully completed.

Q33 Jon Trickett: So the 338 is the 85%, the residue of people where the treatment was not completed.

Mr Narey: 85% of 338, so about 290.

Q34 Jon Trickett: Did you say there was a direct correlation between the number of people who fail the course, if "failure" is the appropriate word, and the amount of crime these individuals commit?

Mr Narey: Research⁶ has shown that for people who get on these programmes all taken together, the average re-conviction rate within two years is 80%. For those who do not complete the programme, it is 91%. For those who do complete the programme it is 53%, which is still very high, but set against the amount of offending individuals on this programme that is quite a remarkable achievement. It is not just a matter of who fails and who finishes. The evidence

⁶ *Note by witness:* Figures taken from "The impact of Drug Treatment and Testing Orders on offending: two-year reconviction results" (Home Office Findings 184), a follow-up study of offenders in the three DTTO pilot areas—Croydon, Gloucestershire and Liverpool.

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shows that every week somebody stays on a programme, their re-offending is reduced. A failure at nine months can still have had a very significant effect on crime.

Q35 Jon Trickett: Would I be right in saying that there is what used to be called in the Health Service a post-code lottery across the country? It is clear from this table that there is. In some areas a huge amount of success is being achieved and in an area like mine we are struggling for whatever reason to complete the treatment successfully. To that extent there is a post-code lottery. It depends where you live as to whether you have successful treatment or not to some extent, does it not?

Mr Narey: There are some geographical differences which would be a lottery, different approaches by the courts and different approaches by the police. For example, one of the reasons Kent's completion rate is so low is that the police are very, very active there at tracking ex-offenders and the chance of being apprehended for future offences are very great there. It is very early years for this programme but overall we have tried to make sure that areas are equivalently funded and have the same access to the treatment budget and so forth. Of course there are some differences, but there is no particular reason why we should not be able to take this chart over time and bring performance back to a norm.

Q36 Jon Trickett: The fact of the matter is that if you are an offender in West Yorkshire, in my constituency, where the drug use sadly is very high as it is in many pit villages, you are not really heading for success. One of the views which I get from many, many parents who come to see me in a state of great anguish and anxiety and trepidation about their young children, young adults often, is that the drug treatment meted out in that area, and I have already alluded to this fact, keeps people within the community which pressurised them originally into taking drugs, they are still left amongst a peer group with the people they know who sell drugs and prey on the weakness of the individuals. Is there not a case for doing what Dorset is doing in terms of taking people out of the community, as anecdotally the parents in my patch are saying "If you don't take Johnny out of our street he's just going to go straight back onto drugs as soon as he goes out through the door again"?

Mr Narey: I agree with almost all of that. You will be glad to know that very shortly, using what was the old PRES⁷ Hostel outside Wakefield Prison, we are about to open a hostel in West Yorkshire which may be able to be used for some individuals on these Orders, to give them the sort of shelter they need from their communities. It is almost impossible for many individuals to return to a place where drugs are being sold the whole time, sometimes even, as one case study I saw this morning where someone had done rather well on a DTTO, astonishingly so because his mother was also taking heroin. In those

circumstances it is very difficult to expect somebody to succeed. The reality is that even if we improve hostel provision significantly, we are going to have to deal with the reality that most people who are getting this Order have to cope in exactly those circumstances. We must give them all the support we can to get them through it.

Q37 Jon Trickett: On the theme of a post-code lottery, in my patch you currently do not have residential alternatives. Can you really convince the Committee, or me at least, that the funding is equitably distributed? It strikes me that the number of offenders and users per head of population varies from one area to another quite substantially. It appears that the targets which have been set nationally relate to the amount of funding made available to the Probation Service, according to a note we have received. Is that the case? Can you really say that the funding, the money, and the number of Orders relate in a directly statistical way as a function of the number of users in a particular area? Anecdotally again, I have to say that is not the experience of the people I represent.

Mr Narey: Yes, we believe so. There are clearly some discrepancies, some areas where we have to spend more on treatment because they might have a cohort of offenders who need more intensive treatment, some may have to spend more on the wrap-round services, education, cognitive skills programmes, but I think the distribution of money to probation services is reasonably equitable. You might like to ask Mr Hayes about how we distribute the national treatment budget for the clinical parts of this exercise.

Q38 Jon Trickett: Yes, I should like to hear that.

Mr Hayes: Just as the probation funds are distributed according to a formula which reflects criminogenic need, so the drug treatment funds are distributed according to a formula which reflects a number of indices of social deprivation which now reflects the prevalence of drug misuse. The formula we have implemented over the last year is a new recasting of the formula which more closely reflects need. Generally speaking there has been a shift of resources away from the South and the West of the country towards the North and the East, which historically have been underfunded. Areas such as Yorkshire are in fact receiving a higher proportion of funds now than they did previously. That is being phased in over a three-year period to minimise the impact on the areas which will be losing funding, but we are fairly confident, ourselves and the National Probation Directorate have looked at these issues in some detail, and we are confident that the level of funding each area gets enables it to deliver the amount of treatment that they need for DTTOs to be successful.

Q39 Jon Trickett: There are significant statistical variations between regions. It is very difficult to get the information out of this Report because that is not the subject of the Report. There are, however,

⁷ Note by witness: Pre-release hostel.

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statistical variations. Paragraph 2.4 for example, on page 17, refers to variations in achieving targets and so on. Indeed paragraphs 2.5 through to 2.10 refer to other variations in the way in which the money has been allocated and the way in which objectives have been achieved. It would be helpful to me personally, if the Chairman would agree, if you could provide us with information as to how the formula operated, what the changes were and how it will look when the three-year tapering period is finished. I do have a feeling that there is a degree of post-code lottery. If that is the case, it must inevitably follow that treatment does not necessarily follow need at a community level.

Mr Narey: We have relatively recently reviewed this and slightly changed the targets for London and Teeside. Fundamentally we believe that the distribution of funds is just about right. I should be very happy to provide the Committee with a detailed note.⁸

Q40 Mr Jenkins: If I can get Figure 18 right in my head to start with, Staffordshire has a completion rate of about 15% but the numbers terminated are 108. Is that 15% of the 108 who successfully completed the programme?

Mr Narey: That is correct.

Q41 Mr Jenkins: And the rest fell by the wayside.

Mr Narey: For the rest the Order was terminated because of non-compliance with the Order or because another criminal offence was committed.

Q42 Mr Jenkins: So they fell by the wayside.

Mr Narey: That is right.

Q43 Mr Jenkins: You have a lot of experience in this area, if not with drugs, with criminality in general. In your view is this the best use of our money?

Mr Narey: I have previously been here defending the Prison Service for which I had responsibility until 18 months ago and I have spent a lot of time trying to make prisons effective by reducing drugs and in certain circumstances they can be. For the sort of offenders we have here, who would otherwise receive short prison sentences, this is overwhelmingly more effective. As we improve its effectiveness, as I believe we will over the next few years and significantly extend the availability of the Order—for example we could only afford 9,000 Orders last year and it will be 13,000 this year, 16,000 next year—I think this has the potential to make a very significant impact. It is offering very good value for money. This is about £6,000 an Order as opposed to about £30,000 for a prison place.

Q44 Mr Jenkins: Just to get it straight in my head the purpose of the programme, is the purpose of the programme to reduce offending behaviour in as far as criminality is concerned, that is burglary and theft, or is the purpose of this to reduce the use of illegal drugs?

Mr Narey: It is both. It is to get more people into treatment but reduce re-offending. This is a partnership between us and the National Treatment Agency. I am sure Paul would say his main aim is to get more people into treatment and stop the drug misuse. It is a partnership which works exceptionally well. The pay-off for me, what I am measured against, what I believe this will achieve, is a reduction in crime.

Q45 Mr Jenkins: So we could have a reduction in crime but a continuation of drug use, albeit at a lower level, and that would be a success.

Mr Narey: Pragmatically I believe so. I was in Bolton three weeks ago and spent a morning with eight young people, six men and two women, all on Drug Treatment and Testing Orders. They were disarmingly frank. Seven of them said they were still taking drugs, but what they were not doing was getting up in the morning and going out, as they call it, to work, to steal all day long to get sufficient money to buy their heroin that evening.

Q46 Mr Jenkins: If we had a collapse in the price of drugs and they do not have to go out to commit so many crimes to purchase the drugs they require, that would be a success as far as you are concerned in that there would be a reduction in crime.

Mr Narey: If it meant less offending, it would be a partial success. There is still the issue that they were damaging themselves with drugs. Yes, to be frank, people who buy drugs legitimately and do not commit crime are less of a worry to me than those who steal and rob to fund their heroin habit.

Q47 Mr Jenkins: Has any research been done along the lines of giving these people the £6,000 a year not to offend and go out and rob and steal, but still to be able to buy their drugs?

Mr Narey: That is not a speech I should like to draft for a minister.

Q48 Mr Jenkins: But do you see the point of my question?

Mr Narey: Yes, I do and to some extent that is a principle behind the Order, because we are giving people a great deal of support, we are not requiring abstinence, we are being pragmatic about the fact that they are unlikely to turn away from taking drugs very quickly and they may relapse over and over again. We are not giving them financial support, but we are giving them a great deal of other support to try to wean them off drugs. The thing I like about this order is that it is absolute realism about the nature of drug addiction.

Q49 Mr Jenkins: But you see it as a continuing problem for our society and it is one which is not going to go away, so let us try to contain it.

Mr Narey: I am rather more optimistic than that. There is some containing of this and as I mentioned earlier on, evidence suggests that re-offending for every day you are on this programme is perhaps 75%

⁸ Ev 15

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reduced.⁹ The eventual aim is to get people off drugs permanently. That is very difficult and it may take a number of attempts, but eventually we can and will achieve that. I am not suggesting this is going to solve the drug problem, which is very nearly overwhelming, but I think it is a very pragmatic and practical approach to doing so.

Mr Jenkins: I wish you well in your task.

Mr Steinberg: Mr Narey, I like you a lot, I have known you for a long time, but you should be a social worker and nothing to do with prisons, to be quite honest.

Chairman: Was that a compliment or an insult?

Q50 Mr Steinberg: It was a compliment. He is too nice to be in the Prison Service and that is probably the reason it is the way it is. I was asking Parliamentary Questions about this about six months ago, as you are probably aware. I was talking to some solicitors and they were asking me to put some questions in the House about the Drug Treatment and Testing Orders because they felt they were a waste of time, a failure. They were spending more time now back in court than they were previously with all the offences which are being re-committed whilst they are on these Orders. What do you say to that?

Mr Narey: I should like to be fairly robust, if I may. A number of times you have made plain your quite proper irritation at the way community penalties are not being enforced. A lot of court time is caused by these Orders for two reasons. First of all, we allow sentencers to review progress, which is a very important development, which I should like to extend further. I do think we should tell sentencers what has happened to people they have sentenced. Secondly, because breach is so rigorous, a lot of people are returned to court, but all my experience of offenders is that if they understand very clearly that consequences will follow their actions, if they understand that if they do not comply for a second time on this Order they will be breached and will be back in court, they are more likely in the longer term to comply. I think your solicitor friends were quite wrong. The fact that there is a lot of court time generated by this—

Q51 Mr Steinberg: They spend more time in court with them, so how can they be wrong?

Mr Narey: Because they may be misunderstanding. One of the purposes of this Order is to make sure it is properly and rigorously enforced and the evidence of that is the amount of time people spend in court. You may think I should be a social worker but magistrates and judges who see these individuals back in court very frequently consider that sufficient progress has been made despite the breach to give them another chance on the Order. They can see that there is real evidence of reduced re-offending.

Q52 Mr Steinberg: One of them told me that when he came out of court after getting someone onto a Drug Treatment and Testing Order the addict said "Well done. Great. Fantastic. I've got one of those Orders now and I haven't gone to prison. Well done".

Mr Narey: I have no difficulty with that.

Q53 Mr Steinberg: You have no difficulty with that?

Mr Narey: No. If somebody wants to take the motivation of not going to prison to comply with this, then fine. I know with absolute certainty that if they do not comply they will be re-sentenced for the offence and they will go to prison. It is folly to take one of these Orders and agree to comply and not do so, because you will do a few months on this order and then you will go to prison anyway.

Q54 Mr Steinberg: He also told me that as far as he is aware the vast majority of them on the Orders commit numerous offences while they are on the Orders, but they are not brought back because they know very well they can do that and they are not going to be brought back to court.

Mr Narey: I have made you this offer before. You know I spend a lot of time in the North East. I am convinced I could take you into Durham City and introduce you to offenders on this Order and they would convince you that they were offending much less.

Q55 Mr Steinberg: I bet you could. I am also told they get the gym free, they get this free, they get that free, they do this, the day is filled in for them.

Mr Narey: The day is filled in for them. It is a very necessary part of the Order that we give them a lot of activity. We take them out of their environment and we give them things to do. However, it is not all gym. I have presented educational certificates to people on this Order. I see people getting their first educational qualifications ever.

Q56 Mr Steinberg: They get that in prison as well.

Mr Narey: They do get it in prison as well. The employment status of people on this Order improves significantly during the time they are on the Order. It makes a lot of people employable.

Q57 Mr Steinberg: What is more successful, somebody being locked away off drugs, or on one of the Orders? What is the most successful?

Mr Narey: It is very difficult to give a single answer. If somebody has committed a very serious crime and needs to go into custody for a long time, I think custody can make some difference and can get somebody off drugs.

Q58 Mr Steinberg: You talk about a very serious crime but Jim Sheridan brought up the very point. This morning before I came away I had somebody on the telephone in tears, a man who fought in the first Gulf War, a marine. He was in tears because he had given information to the police about drug dealers and drug takers in his village and he was being threatened; he had had his windows broken

⁹ Note by witness: "Drug treatment and Testing Orders: Final evaluation report" (Home Office Research Study 212)

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and his life made a misery because of these people. They should be locked away. Never mind these Orders, they should be locked away until they are off drugs and not committing offences.

Mr Narey: I understand why you would come to that conclusion and I would say this, would I not? I was in the Prison Service for 20 years and we can get people off drugs in prison. The great challenge, and offenders tell me this all the time and I believe them, is that it is one thing to stay clean in prison, it is quite another to go back to the community you have come from, where your mother is on drugs, your father is on drugs, all your friends are on drugs and to maintain that gain. This Order makes people keep off drugs within their normal life.

Q59 Mr Steinberg: How much does a successful Order cost? You just said to Mr Jenkins that an Order costs between £5,000 and £7,000.

Mr Narey: About that.

Q60 Mr Steinberg: That includes the failures as well, does it not?

Mr Narey: Yes, it does.

Q61 Mr Steinberg: So how many successful Orders are there and how much does that cost?

Mr Narey: About one third of Orders are completed successfully, they get to the end of the Order.

Q62 Mr Steinberg: So now we are talking about £21,000, are we not?

Mr Narey: We are, but as I have also explained, even for those orders which are not completed, if someone is on an Order one of the graphs here shows that the peak time for failure is four months. If someone has been on one of these Orders for four months the severity of someone's offending when they are paying for a daily heroin habit will make that cost effective even if the Order is not completed.

Q63 Mr Steinberg: Tell me what you believe to be a success story?

Mr Narey: Someone using fewer drugs and committing crime less frequently.

Q64 Mr Steinberg: That is a success?

Mr Narey: I think that is a success.

Q65 Mr Steinberg: So somebody who is on an Order, who is still thieving and who is still taking hard drugs, because he is doing it less frequently, that is a success is it?

Mr Narey: Not a complete success, but yes, that is a success. If we have fewer victims of crime and someone is taking fewer drugs, that is a success.

Q66 Mr Steinberg: My idea of a success would be to take that person off the street, stopping him or her committing offences, and lock them away until they are off drugs.

Mr Narey: I have 240 empty prison places at the moment.

Q67 Mr Steinberg: It would be no more expensive. It is £30,000 for a prison place and we have worked out that it is £21,000 for a successful Order and in your definition of success they are still committing crime and still taking drugs. That is not a very big success to me.

Mr Narey: I am not suggesting that it cannot be improved; it must be improved. I do not want to dismiss the achievements which have been made in prisons in recent years which are very significant. I know that even now, although things are improving fast since a thing called the Criminal Justice Interventions programme, for which Mr Hayes is responsible. The reality is that most people who get clean from heroin in prison spend their discharge grant on heroin the day they go back to the communities from which they come. Keeping clean in prison is one thing, keeping clean in communities is quite another.

Q68 Mr Steinberg: When I was reading the Report I thought to myself that the Report seemed to indicate that those who are the worst offenders and those who are frankly taking the system for a ride are the ones who get all the benefits. The genuine ones, who want to come off drugs, who are on methadone and are not taking cocaine and who are not taking heroin, are the ones who cannot get on, but the worst offenders are the ones who get on. Surely it should be the ones who have an aim to improve, have an aim to succeed; they should be the ones who are given the help, not the ones who are not interested. In Durham it seems to me that is the case, but if you read the Report, unless I am getting mixed up, paragraphs 2.9 and 2.10, it seems Sussex took the opposite view. They were saying that the priority should be given to those who want to make progress. Is that not more sensible?

Mr Narey: I think what you are saying is that people who do not comply, who do not help themselves should go to jail and that is exactly what happens with this Order. If someone does not comply, they are only allowed two failures. After two failures they must be returned to court.¹⁰ The court may give them one chance, but ultimately if people do not comply with this Order, they might have had four months on this Order and then they get a prison sentence which is a fresh sentence for that offence. The people who do not co-operate, who do not take advantage of this, end up in jail. Some people, at least one third or more eventually, do co-operate and we manage to make some progress in terms of reducing the drug abuse and drastically cutting their re-offending.

Q69 Mr Steinberg: The question I asked before was that in the experience of the solicitors to whom I was talking, people were breaking the Orders on a very regular basis, but the Probation Service very often forgot to let the courts know this was happening.

¹⁰ Note by witness: Two unacceptable failures eg missed appointments within any 12 month period.

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Mr Narey: I certainly do not believe that—

Q70 Mr Steinberg: I am being facetious. In fact when crimes were being committed they were turning a blind eye.

Mr Narey: I do not think that happens; certainly not in your constituency. You know your chief. She is exceptionally able, very resolute. I think offenders in Durham know exactly where they are in terms of breaching. If they do not co-operate with this Order, ultimately they will find themselves in jail.

Q71 Mr Steinberg: May I say that over the last 17 years I have formed my view, not on individuals in the Probation Service, but on the whole system and that I have had two constituency offices in 17 years, both next to probation offices. The disrespect the criminals have for the Probation Service and the way they hold it in contempt clearly means something needs to be done and the whole Probation Service needs to be transformed or reformed or whatever.

Mr Narey: I have been responsible for the Probation Service for 18 months and I am very impressed with many of the people I have seen.

Q72 Mr Steinberg: I was not talking about the people, I was talking about the system.

Mr Narey: There are several testimonials in here from offenders, quotes from offenders saying how much they have been helped through their problems by the Probation Service.

Q73 Mr Steinberg: I have seen them coming out of the doors and making a gesture all the time.

Mr Narey: They may do that occasionally but they are also very, very tightly managed now and enforcement by the Probation Service has been transformed. People who try to mess around with the Probation Service and do not comply with any community sentence find themselves back in court and many of them go to jail.

Q74 Chairman: For what it is worth, Mr Narey, your client group last week told us that there were more drugs inside prison than outside prison. It does not say much for your management of the prisons that we have to have these Orders in the first place, does it?

Mr Narey: To quote someone else, they would say that would they not? It is just not the case that there are more drugs inside prison than outside prison, I promise you. We use the same random testing process which is used for those arrested in police stations. As quoted in this Report, of those arrested in police stations 60% or so have been taking heroin. We randomly test between 5% and 10% of the population every week in prisons and the figure is about 3%. Drugs are available in every prison, but not in the sort of quantities to sustain addiction, which is tragically one reason why both in Scotland and more recently in England significant numbers of people discharged from prison kill themselves by

overdosing because they do not realise they can no longer cope with the sort of doses of heroin they were taking before they were locked up.

Q75 Mr Williams: Obviously if we can save people from addiction we want to try to do it at not excessive cost to the community. I gather from the National Audit Office that the South Bank University carried out an analysis in three pilot areas for the Home Office on re-conviction rates. According to what they tell us, offenders who seem to respond early on during their course actually tended to have a high re-conviction rate of about 80% after about two years, but those who managed to get right through the process had a reconviction rate of 53%. Clearly that is a significant bonus for completion. I recognise it is early days and we cannot expect you to have too much information, but what analysis has been done of the characteristics of the people who do survive in so far as this might help you select the people who are going to be most usefully put on the Orders in the first place?

Mr Narey: I cannot give you a very simple answer. The nature of these programmes is that people may fail them very frequently. There are some signs that we are beginning to get better at selecting individuals and the one reason why I believe we will improve the completion rate is that we know much more about individuals coming to court. For example, we now have arrest referral schemes, where individuals are given the choice of taking drug treatment on arrest or having that count against them in getting bail. We are getting much more information from people when they first come into court, so we have more information available to us to help us to assess the likelihood of somebody complying with this Order. I do not know whether that answers your question.

Q76 Mr Williams: There are two elements which need assessment, are there not? There is the characteristic of a regime, which is throwing up the most beneficial results and then there are the characteristics of the client group which is most susceptible to benefit. What I am trying to establish is whether systematic analysis is going on to carry out these different evaluations.

Mr Murphy: We are operating on all those fronts, because the Order is a relatively new phenomenon. There are bits about the regime which we need to attend to, as you rightly mention, and we learn as we go along. You will have seen that the Report itself reflects how the very fixed nature of it with its 20 hours contact time does not always meet the needs of all the different people who get onto it and some more flexibility in that would assist. We have some information already about the nature of people who go through treatment successfully. One of the points the Report makes is about how rather older young offenders are more likely to engage with treatment than younger people. As that evidence base develops, as we are able to track through who we are keeping at three months, six months and 12 months, who is reaching the end of the Order, that will then

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loop back into practice to enable us to do better assessments early on to make sure we are clearer about which offenders are more likely to succeed through the Order. It also attends to some of the issues which Mr Jenkins and Mr Steinberg raised earlier on.

Q77 Mr Williams: But there is systematic collection of information going on and analysis going on, so if in four years' time you come back to this Committee, you would be able perhaps to say the analysis over the years since we started is now long enough for you to be able to identify these regime characteristics and these individual characteristics.

Mr Murphy: Yes. We have probably the most sophisticated offender assessment system in the world called OASys, which is gathering information at the start and through Orders and at the end. As this Order is still relatively new and as OASys has only spread out relatively recently, we will reap a very rich harvest of information from that.

Q78 Mr Williams: Can you give us a note on that? I am sure I should have read something about it in here. I am not sure whether it is covered in the Report. Could you give us an up-to-date note on that?

Mr Murphy: Yes.¹¹

Mr Narey: Certainly.¹²

Q79 Mr Williams: Looking at Figure 19 on page 29, there is a very clear indication that the third to sixth months are the highest failure rates. Over 50% of failures occur in that period. Again I recognise that you have had limited time for fieldwork, but are you able to identify why those particular periods are so disastrous in terms of drop-out?

Mr Murphy: The likelihood is that the reality hits for a lot of people at around that stage. The original motivation may wane, the pressures we have heard about in relation to other aspects of people's lives and indeed pressure from peers may prove difficult to resist. The important thing we hold onto is the fact that this is getting people into treatment, many of them for the very first time. We know that they will only get through their drug addiction by coming back a number of times and it is valuable to start that process. I agree it does not attend to the problems of crime they are committing right now, but it will in the fullness of time prove to be the first episode and it may take three or four goes.

Q80 Mr Williams: How capable of responsiveness is the system? Now that you have this progress chart of drop-out, how susceptible is the system to adaptation to try to produce remedial influences during that critical couple of months or six months?

Mr Murphy: The information which it provides enables us to do the work to find out and we have a number of ways of doing that. We will look at those areas where this drop-out rate at these periods on the Order is better and we will check with them about

how they manage to hold people for longer. This is a picture in Leicestershire, as you can see, but there will be other areas where that pattern is different. What we have tried to do is learn from those areas which are holding people for longest and most successfully, so that we can replicate that in other places as well.

Q81 Mr Williams: What system do you have for cross-fertilisation of best practice?

Mr Murphy: It is a national service. We operate through regions as well as areas and we work through our regional managers to try to learn best practice in a number of ways, not just in relation to this Order, but in relation to others. We use our regional staff to run seminars, to draw information together, to look at analysis, look at the analysis we do at the centre here and to roll that out. We regularly offer best practice, guidance and seminars and we are continually reviewing that process.

Q82 Mr Williams: Table 18 shows the variations in completed Orders and early terminations through to good progress. Am I misreading the footnote or is this in fact a substantially optimistic assessment of the success rate? Reading the footnote, it says "The figures . . . include cases where the Order expires whilst the offender is in breach and the Order is not formally revoked by the courts". So in fact really it does include people who are in breach.

Mr Narey: I do not think it is correct basically. It does over-estimate the completion because some people who come to the end of their Orders may have outstanding charges not dealt with in court, but not substantially so. This is still a fairly reasonable guide to completions.

Q83 Mr Williams: You say "not substantially", but if you look at the second part of the footnote, the two cases they analysed in depth, in the case of Leicestershire, it is one in six would drop out of this table if the later figures were included and in the case of London it is one in four. That is a massive reduction; over 150 of the people who are seen to have benefited would drop out. Are we able to get more refined statistics? Are you developing more refined statistics? We have looked at failure rate after two years and one can understand with such a short lifespan you cannot do more. You are then going to have wider intervals as well of follow-up; you are not just saying after two years that has gone all right, now we will forget about them. Do you envisage doing four-year or five-year follow-up analysis or not?

Mr Murphy: The expectation is that whilst some of that may have to come through research evidence, some of the existing systems will kick in at those critical points. We usually measure two years after completion as well. Some follow-through is built into the system, but if we want to go into much longer periods, the likelihood is that we will have to do specific research.

¹¹ Ev 15

¹² Ev 15

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Q84 Mr Williams: What worries me is the thought that it is probably in the short period that they had the most active support when they are coming off this system, but after two years are they in danger then of dropping out of the support regime which has helped them to get through those two years?

Mr Murphy: May I conclude on two points before handing over? I am sure Mr Hayes will deal with the hard landing issue you raise, but in answer to your other question, we will henceforth be excluding the figures which have concerned you on that table, so the next picture will be a picture which includes those who are in breach at the time the order finishes, but who have not been to court yet. You will get the accuracy of data you are seeking.

Mr Hayes: We have significantly expanded the availability of drug treatments for the general population over the last two years and drug action teams, who are the bodies charged with ensuring that drug treatment in each area in England is as effective as possible, build into their treatment plan not only the delivery of Drug Treatment and Testing Orders to match the Probation Service targets, but also the capacity to offer the people who have been through DTTOs, who still need treatment, access to appropriate treatments and other social support services. They are part of an integrated system of care. Whilst they continue to need care and treatment, they will receive it. What we cannot do, as I was saying earlier in response to Mr Sheridan's question, is track them as though they were offenders, because they have ceased to be part of the criminal justice system at that point. The NHS will still be aware of their needs and will track them in order to ensure that they derive maximum benefit from treatment. However, if they do relapse, they are very likely to return to offending and we will pick them up again at the police station or court.

Q85 Mr Williams: One of my colleagues touched on the benefits issue. You talked about accommodation and so on, but you also need the Benefits Agency to be aware of the need. Once they begin to lapse, they are less and less capable of making meaningful applications for themselves and they become a nuisance in the office and so on. Is that something which can be in any way catered for?

Mr Hayes: What we are moving towards, both for the generality of drug misusers through the implementation of the service framework for drug treatment called Models of Care and also for the most problematic drug misusing offenders through the Criminal Justice Interventions programme, is to have case managers available ultimately to all drug misusers. So not only whilst they are in treatment, but also whilst they are in receipt of social support services, there is someone who actively helps them manage their way through the system, keeps in contact with them, maybe for three, five, seven years, through various periods of treatment, followed by abstinence, sometimes followed by lapse, re-entry into treatment, to try to make sure that they not only get the best benefit out of the treatment, but also that they are housed appropriately, that they are

employed, that they can look after their children and they have a reason to stay drug free and crime free and not slip back into former habits.

Q86 Chairman: Mr Narey, could you please look at page 33 and paragraph 3.29? This relates partly to what Mr Steinberg was saying. "Senior Probation Officers we spoke to were concerned that initiating formal breach proceedings—a frequent occurrence with this Order and client group—was expensive and took up too much time". Of course that begs the question, if that is true, whether therefore some probation officers are not doing it because it just takes up too much time. The question I should really like to ask you is whether you are loading too much paperwork onto your officers, wasting their time and in practice encouraging them not to report breaches?

Mr Narey: I do not think so. We are certainly being pretty resolute that enforcement of this and other community penalties has to be very different from the way things were a few years ago and we have indeed used the last Criminal Justice Act to remove any sort of flexibility so that for a second unacceptable failure on this or any other Order the local probation officer has no choice but to breach. I am not naïve enough to suggest that sometimes that may not happen, but overwhelmingly the statistics show it has, because the proportion of all community sentences breached now is in the region of about 85%, very, very high levels of breach action taken within ten days. I am reasonably confident that this is taken very seriously. Mr Steinberg has commented on the amount of court time taken up with this and this is further evidence. This does cause a lot of people to come back to court, because we are very tight in terms of the policing of it.

Q87 Mr Steinberg: The point you missed was that they actually know that they can screw the system up as well, do they not?

Mr Narey: I am not sure how they screw the system up.

Q88 Mr Steinberg: Because they know that if they disappear and you cannot find them a huge process has to be gone through before you can do anything about it?

Mr Narey: Most of the individuals in this sort of Order, if they go missing, yes, they may be temporarily missing, but frankly most of them usually turn up back in the communities if not back in their homes eventually. The police pick them up and they go to jail.

Q89 Mr Jenkins: One clarification. At £6,000 an Order, if Staffordshire, for instance, had a 15% completion rate, that would not mean that the completion rate was £36,000 would it? Do you have £6,000 up front for every completed Order or do you pay on a monthly basis depending how long they are on the Orders?

Mr Narey: No. We issue budgets to probation areas based on the number of commencements we expect them to make. This year for the first time, we are

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giving a cash incentive to get more completed. Those areas which get 35% of their Orders completed this year will get some additional money in their budget in future years and that is to encourage completion rates. I do not think it is fair just to think of £6,000 spent on an Order which eventually results in somebody being in breach and going back to jail as necessarily a failure. For the time they are on the Order, the amount of re-offending will be quite low. Some Orders, as the graph shows, are breached quite late during the 12-month Orders, so there may have been significant gains, even though eventually somebody fails the Order and goes to jail.

Q90 Mr Jenkins: So it is like £6,000 up front, though it is not effectively.

Mr Narey: More or less, yes.

Q91 Mr Jenkins: So in effect you have a perverse incentive. If I were to be an awful individual and think that if I got rid of some of these people I would still have the money and it would mean less work, so let us get them off the scheme, have less work to do yet the money is still going into the office. How do you overcome that?

Mr Narey: Because we not only pay for commencements, that is people on the Order, we incentivise through the budgetary arrangements for people getting through the Order. If an area this year got significantly fewer than 35% of the people starting this Order through to the end, they would be penalised financially. I am very confident that will not happen.

Q92 Mr Jenkins: How do you intend to get Staffordshire from 15% completion? I know about all the seminars, but how do you intend to get them up?

Mr Narey: By sharing best practice from other areas. By putting more money into the services so they can provide better activities, greater ability to offer basic skills courses, other things which can keep them occupied, other things which can make people more employable. This Order is still relatively new and we have a lot of experience here to share. Obviously we are going to be looking very closely and are looking very closely at those areas which have very high levels of completion rates to see what we can learn and to see what we can export to other areas. If you knock off the top four in the famous graph we have been looking at and the bottom four, then completion rates are pretty much of a muchness. We need to get the bottom outliers up to standard.

Q93 Mr Jenkins: They would double. If you took the top four and the bottom four, one is 20% and one is 40%.

Mr Narey: No, no. I said if you take those outliers from the top and the bottom, the majority are fairly similar in terms of the completion rate. We do not want to stop the top ones working exceedingly well, but for the bottom four or five areas we clearly need to ensure a radically improved performance this year and in future years.

Q94 Jim Sheridan: You are probably aware that there is a major ongoing debate about classification or use or misuse of the so-called soft drugs in our society such as cannabis. Within the crime statistics is there any evidence to suggest that it is the case that the misuse of soft drugs has a major impact on your resources, financial or otherwise?

Mr Narey: Mr Hayes is more of an expert than I. There is no evidence to suggest soft drugs have anything like the impact on crime and offending that heroin does. It is heroin and other hard drugs which drive persistent offending.

Q95 Jim Sheridan: If cannabis were to be reclassified as a safe drug, it would have no impact whatsoever on the crime statistics.

Mr Narey: It would have a negligible impact because drug related crime is driven most of all by people's addiction to heroin and cocaine.

Q96 Chairman: Obviously the people who are working in this field have one of the most difficult jobs, dealing with some of the most chaotic lifestyles you could imagine. Are you getting sufficiently high quality staff? Can there be a suspicion that some people are just going through the motions, meeting targets, or are you really getting the best to do this very difficult work?

Mr Narey: All I can say is that I have now visited 23 probation areas. I have been enormously encouraged by the calibre of staff we get in the Probation Service. It is still very much a vocation. Some individuals resist this rather more vigorous approach to enforcement, but overwhelmingly we have high levels of dedication. I have seen lots of evidence of people keeping individuals' lives on track and protecting communities by doing so.

Chairman: Thank you, gentlemen, that concludes our hearing. I was pleased you had that exchange with Mr Steinberg, because it is important we get that out in the open and it is the view of many people in the country that people who commit these offences should be locked up. Although they may be taking drugs in prison, although you deny that, at least they are not committing any offences while they are in prison. Equally, as we have seen from our visit, this is a very useful initiative and we wish it well. However, we should like to have far more information about the outcomes, not just the completion rates, but how successful you are in the long term. It is on that we shall judge you. Thank you very much.

Supplementary memorandum submitted by the Home Office

Question 39 (Jon Trickett): Response to the PAC in relation to the allocation of Pooled Treatment Budget funds

Funding for drug treatment is distributed to Drug Action Teams through the Pooled Treatment Budget (PTB). The formula used to allocate central support for drug treatment was revised in 2002, using a basket of criteria that were seen to be more relevant in estimating treatment demand. The revised formula led to considerable re-adjustments in PTB allocations and in order to ameliorate the impact, a decision was made to phase in the changes to ensure that no DAT faced a cut in its budget and that the changes were spread over a three year period. DATs were also given indicative budgets for 2004–06 to enable them to forward plan.

The overall increase in the pooled treatment budget allocation was as follows:

- 2003–04—23%
- 2004–05—7%
- 2005–06—18%.

To enable all DAT's to continue to increase the scale and effectiveness of treatment available to its community a minimum uplift of 10% was agreed for 2003–04 and 5% for 2005–06. The smaller increase planned for 2004–05 was targeted at those DAT's where needs were considered to be greatest.

Column one of the attached tables (please see Annex) identifies the actual DAT allocation for 2002–03. The subsequent columns show indicative figures for each of the next two years the cash increase each DAT will receive, the percentage growth this represents year on year, and the total allocation for each year.

Question 78 (Mr Williams): A note on the Offender Assessment System (OASys)

BACKGROUND

If the National Probation Service and the Prison Service are to be effective in reducing re-offending they need to have a reliable means of assessing the offenders they're working with. Probation and prison staff need to be able to make informed decisions about managing offenders appropriately, and about suitable interventions that will help with their rehabilitation. Staff cannot make those decisions unless they understand the risks offenders pose, both in terms of likelihood of reconviction and risk of harm, and the "criminogenic factors" (such as drug misuse, poor accommodation or illiteracy) associated with their offending behaviour. The information staff need is obtained through the Offender Assessment System or "OASys" (pronounced oasis).

OASys was developed for use as a common system across the whole of the National Probation Service and the Prison Service, and replaces a number of earlier structured assessment tools. It is soundly based on national and international research and was extensively piloted prior to roll out.

Implementation of OASys is well advanced. OASys was originally developed as a paper-based system and was first used in the National Probation Service in its paper version. However implementation of computerised OASys in the National Probation Service and Prison Service began in early 2003 and is expected to be complete around the end of 2004. At that point it will be possible for prison and probation staff to exchange OASys assessments quickly and securely within and between their respective Services.

WHEN IS AN OASYS ASSESSMENT COMPLETED?

OASys will normally be completed for the first time at pre-sentence stage. This allows the OASys assessment to inform the sentencing advice provided to the court by probation staff. The assessment will be reviewed and updated periodically throughout the sentence, whether in custody or in the community, including any period of supervision on licence after release from prison.

WHAT WILL OASYS TELL US?

OASys is first and foremost an operational system designed to help frontline staff to work with and manage offenders more effectively. However the computerisation of OASys is enabling us to create a large database at the Home Office—an estimated 650,000 new assessments are expected to be added every year once OASys is fully operational—which will deliver very significant benefits.

The management information it will provide will be invaluable at local and national level, improving planning and providing a better picture of workload and resource needs. Probation managers will be able to see from the data, for example, how many sexual or violent offenders are currently under supervision in their area, where they are, and how far alcohol or drug misuse is associated with their offending.

As well as the database's role in providing management information its research potential is considerable. The database currently holds some 85,000 assessments from the National Probation Service and has already enabled useful work to be done for the National Probation Directorate, the NOMS Implementation Team and other parts of the Home Office.

In relation to DTTOs we will be able, for example:

- to compare the characteristics of those drug misusing offenders given DTTOs with those who are not;
- we will be able to look at the association of their drug misuse with other specific factors such as alcohol abuse, lack of suitable accommodation, psychological problems, and education or training deficits;
- we will be able to judge the likely demand for DTTOs in a particular area, and see how this varies from area to area;
- and we will be able to judge whether the most suitable offenders in an area are getting DTTOs, and see how this varies around the country.

June 2004

Annex

DRUG MISUSE TREATMENT ALLOCATIONS BY DAT 2003-04 to 2005-06

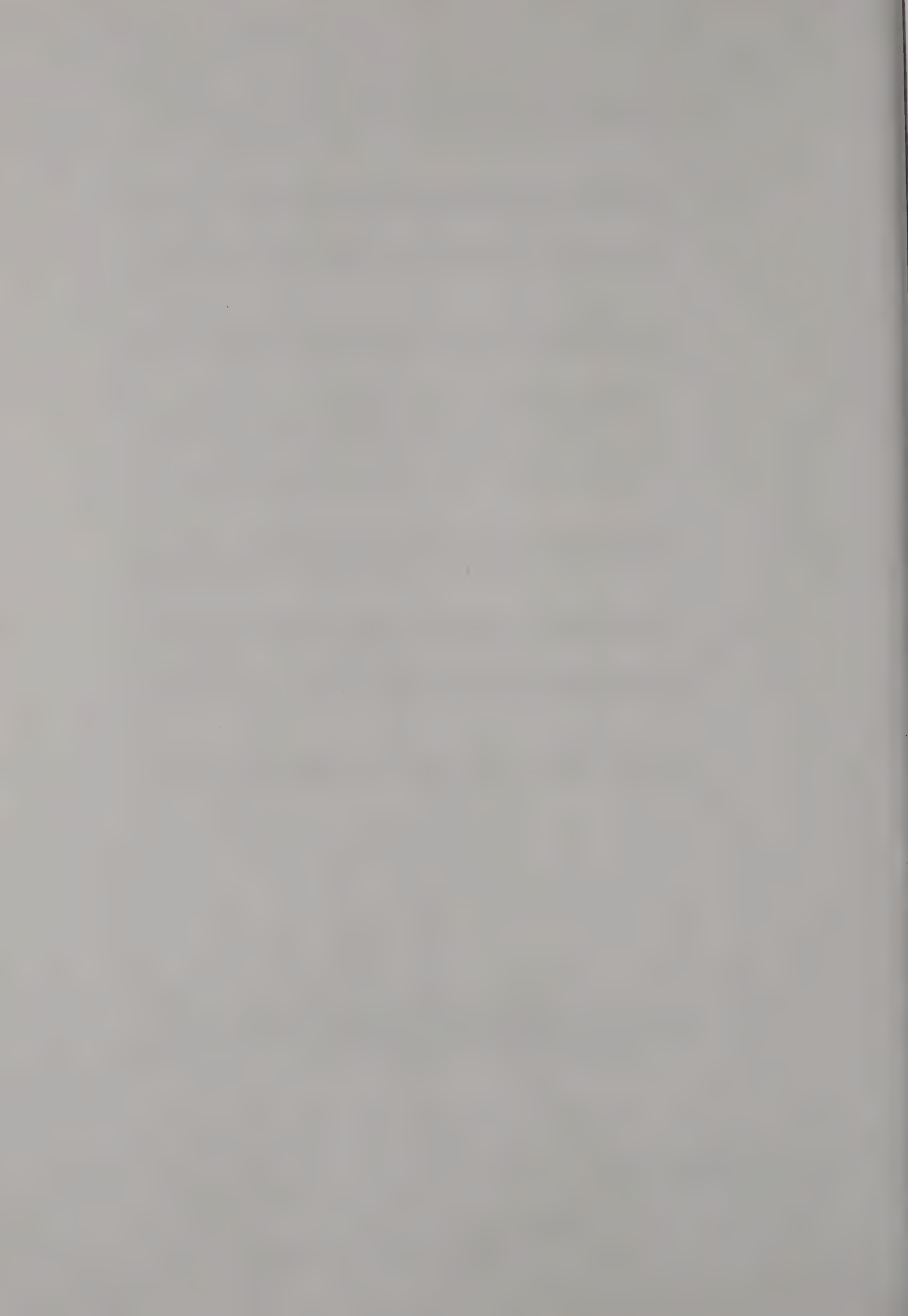
DAT	Opening position Drugs misuse baseline £000s	2003-04		2004-05		2005-06	
		Increase £000s	%	Allocation £000s	Increase £000s	%	Allocation £000s
Darlington	436	105	24.04	541	38	6.96	578
Durham	1,895	466	24.60	2,361	175	7.43	2,537
Gateshead	800	197	24.60	997	74	7.43	1,071
Newcastle City	1,639	394	24.02	2,033	141	6.94	2,174
Northumberland	1,175	237	20.16	1,412	50	3.54	1,462
South Tyneside	980	260	26.55	1,240	112	9.05	1,352
Sunderland	1,470	392	26.67	1,862	171	9.16	2,033
North Tyneside	848	210	24.77	1,058	80	7.58	1,138
Hartlepool	392	136	34.79	528	81	15.39	610
Redcar and Cleveland	555	210	37.81	765	134	17.52	899
Middlesbrough	823	290	35.28	1,113	175	15.75	1,289
Stockton	702	262	37.34	964	166	17.20	1,130
Liverpool	2,838	1,052	37.08	3,890	662	17.02	4,552
Manchester	3,596	898	24.98	4,494	348	7.75	4,842
Bury	440	111	25.27	551	44	7.99	595
Salford	1,201	218	18.18	1,419	24	1.71	1,444
Trafford	776	133	17.13	909	6	0.71	915
Stockport	697	156	22.45	853	48	5.58	901
Bolton	903	249	27.53	1,152	113	9.85	1,265
Rochdale	817	206	25.16	1,023	81	7.90	1,103
Blackburn With Darwen	609	165	27.09	774	73	9.49	847
Blackpool	600	140	23.38	740	47	6.39	788
Lancashire	3,061	829	27.08	3,890	369	9.49	4,259
Cumbria	1,499	353	23.52	1,852	121	6.51	1,972
Warrington	494	133	26.85	627	58	9.30	685
Halton	593	161	27.22	754	72	9.60	827
					176	21.29	1,003

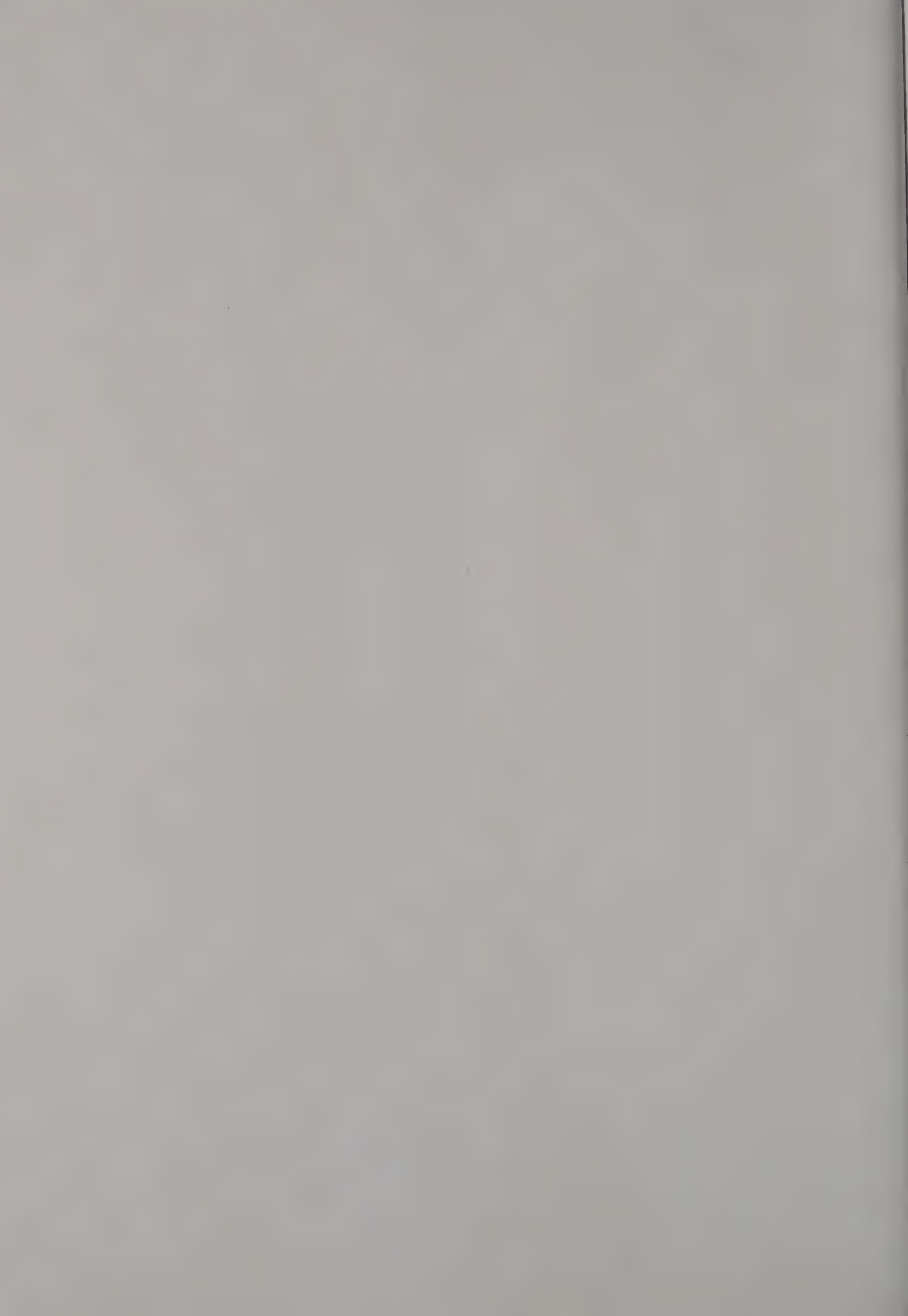
DAT	Opening position Drugs misuse baseline £000s	2003-04		2004-05		2005-06	
		Increase £000s	%	Allocation £000s	Increase £000s	Allocation £000s	%
South Cheshire	1,762	337	19.10	2,099	54	2,152	13.43
Sefton	1,030	306	29.68	1,336	154	1,490	23.31
St Helens	628	212	33.73	840	123	963	26.32
Knowsley	827	348	42.13	1,175	240	1,415	31.59
Wirral	1,060	395	37.26	1,455	249	1,704	28.68
Wigan	911	253	27.77	1,164	117	1,281	21.75
Tameside	750	171	22.85	921	55	976	17.33
Oldham	807	209	25.86	1,016	86	1,102	20.11
Barnsley	923	209	22.64	1,132	65	1,197	17.12
Bradford	1,804	605	33.55	2,409	349	2,758	26.19
Doncaster	1,060	316	29.84	1,376	161	1,537	23.43
Kingston upon Hull	1,600	467	29.19	2,067	231	2,298	22.92
East Riding	701	223	31.76	924	122	1,045	24.90
Calderdale	665	175	26.35	840	75	915	20.55
Kirklees	1,324	350	26.45	1,674	150	1,824	37.6
Leeds	3,437	713	20.73	4,150	168	4,318	656
North Yorkshire	1,532	271	17.69	1,803	23	1,826	11.84
City of York	585	123	21.04	708	31	739	115
Rotherham	1,048	253	24.13	1,301	92	1,392	258
Sheffield	2,485	633	25.47	3,118	255	3,373	667
North Lincolnshire	491	137	27.87	628	64	691	151
North East Lincolnshire	534	261	48.90	795	196	991	348
Wakefield	1,380	261	18.88	1,641	39	1,679	222
Birmingham	5,002	1,875	37.49	6,877	1,190	8,067	2,325
Coventry	1,101	385	34.98	1,486	231	1,717	467
Dudley	1,059	298	28.13	1,357	140	1,497	330
Herefordshire	507	80	15.75	587	0	587	54
Sandwell	1,415	416	29.41	1,831	208	2,039	471
Shropshire	713	146	20.47	859	33	892	133
Telford and Wrekin	640	132	20.68	772	31	803	122
Solihull	554	124	22.41	678	38	716	121
Staffordshire	2,083	503	24.13	2,586	182	2,767	513
Stoke on Trent	1,086	256	23.55	1,342	88	1,430	257
Walsall	1,097	281	25.58	1,378	114	1,491	296
Warwickshire	1,358	251	18.46	1,609	32	1,640	209
Wolverhampton	1,110	377	33.93	1,487	220	1,706	451
Worcestershire	1,475	291	19.74	1,766	56	1,822	258

DAT	Opening position Drugs misuse baseline	2003-04			2004-05			2005-06		
		Increase		Allocation	Increase		Allocation	Increase		Allocation
		£000s	%	£000s	£000s	%	£000s	£000s	%	£000s
Leicestershire	1,177	332	28.23	1,509	157	10.42	1,667	369	22.14	2,036
Leicester City	1,645	419	25.48	2,064	169	8.17	2,233	441	19.77	2,674
Rutland	35	7	20.24	42	2	3.62	44	6	14.68	50
Lincolnshire	1,883	364	19.33	2,247	63	2.78	2,310	316	13.69	2,626
Northamptonshire	1,897	395	20.82	2,292	95	4.14	2,387	365	15.28	2,751
Derbyshire	1,849	545	29.49	2,395	273	11.41	2,668	618	23.15	3,286
Derby City	1,008	255	25.35	1,263	102	8.06	1,365	268	19.66	1,633
Nottinghamshire	1,811	614	33.90	2,425	358	14.74	2,782	736	26.43	3,518
City of Nottingham	1,650	537	32.54	2,187	301	13.74	2,487	634	25.47	3,121
Bracknell Forest	297	35	11.63	332	0	0.00	332	17	5.00	348
Reading	787	103	13.05	890	0	0.00	890	44	5.00	934
Slough	767	110	14.37	877	0	0.00	877	59	6.77	937
West Berkshire	310	35	11.27	345	0	0.00	345	17	5.00	362
Windsor and Maidenhead	373	43	11.43	416	0	0.00	416	21	5.00	436
Wokingham	273	33	12.27	306	0	0.00	306	15	5.00	322
Buckinghamshire	1,266	144	11.41	1,410	0	0.00	1,410	71	5.00	1,481
Milton Keynes	914	102	11.15	1,016	0	0.00	1,016	51	5.00	1,067
Brighton and Hove	1,235	305	24.66	1,540	115	7.48	1,655	315	19.04	1,970
East Sussex	1,104	259	23.47	1,363	88	6.47	1,451	260	17.92	1,711
Isle of Wight	507	114	22.55	621	35	5.67	657	112	17.03	768
Kent	3,948	832	21.07	4,780	209	4.37	4,989	775	15.54	5,764
Medway Towns	905	210	23.16	1,115	69	6.20	1,184	209	17.62	1,392
Hampshire	3,661	366	10.00	4,027	0	0.00	4,027	201	5.00	4,228
Portsmouth	924	171	18.49	1,095	22	2.00	1,117	142	12.75	1,259
Southampton	1,189	222	18.66	1,411	30	2.16	1,441	187	12.94	1,628
Oxfordshire	2,428	243	10.00	2,671	0	0.00	2,671	134	5.00	2,804
Surrey	2,576	258	10.00	2,834	0	0.00	2,834	142	5.00	2,975
West Sussex	1,980	202	10.22	2,182	0	0.00	2,182	109	5.00	2,291

DAT	Opening position Drugs misuse baseline £000s	2003-04		2004-05		2005-06	
		Increase £000s	%	Allocation £000s	Increase £000s	%	Allocation £000s
North East Somerset	375	78	20.72	453	18	4.05	471
Bristol	1,941	405	20.87	2,346	98	4.19	2,444
South Gloucester	451	94	20.78	545	22	4.11	567
North Somerset	390	74	18.94	464	11	2.43	475
Cornwall and Isles of Scilly	1,534	363	23.64	1,897	126	6.62	2,022
Dorset	863	114	13.26	977	0	0.00	977
Bournemouth	737	131	17.79	868	12	1.35	880
Poole	360	50	13.80	410	0	0.00	410
Gloucestershire	1,727	311	18.01	2,038	32	1.56	2,070
Devon	1,965	352	17.92	2,317	34	1.46	2,351
Plymouth	1,191	202	16.99	1,393	8	0.58	1,401
Torbay	555	110	19.75	665	21	3.17	686
Swindon	790	92	11.63	882	0	0.00	882
Wiltshire	1,208	127	10.48	1,335	0	0.00	1,335
Somerset	1,378	227	16.46	1,605	1	0.07	1,606
Bedfordshire	986	210	21.32	1,196	55	4.59	1,251
Luton	835	204	24.46	1,039	76	7.31	1,115
Cambridgeshire	1,822	199	10.95	2,021	0	0.00	2,021
Peterborough	939	115	12.24	1,054	0	0.00	1,054
Essex	3,085	708	22.94	3,793	228	6.01	4,021
Southend	758	128	16.89	886	4	0.49	890
Thurrock	507	120	23.64	627	41	6.62	668
Hertfordshire	3,567	357	10.00	3,924	0	0.00	3,924
Norfolk	2,517	514	20.42	3,031	115	3.78	3,146
Suffolk	2,138	360	16.84	2,498	11	0.44	2,509
					272	10.84	2,781

DAT	Opening position Drugs misuse baseline £000s	2003-04		2004-05		2005-06	
		Increase £000s	%	Allocation £000s	Increase £000s	%	Allocation £000s
Barking	777	242	31.19	1,019	130	12.73	1,149
Havering	566	145	25.66	711	59	8.32	770
Barnet	955	249	26.11	1,205	105	8.69	1,309
Bexley	600	159	26.44	759	68	8.97	827
Brent	1,417	492	34.70	1,909	293	15.33	2,201
Bromley	716	185	25.89	901	77	8.51	978
Camden	2,017	449	22.24	2,466	133	5.40	2,599
Islington	2,451	498	20.33	2,950	109	3.70	3,059
City of London	14	9	66.41	23	8	33.89	31
Hackney	2,112	637	30.17	2,749	328	11.94	3,077
Croydon	1,212	353	29.09	1,565	174	11.09	1,738
Ealing	1,794	341	19.02	2,135	53	2.49	2,188
Enfield	1,093	366	33.45	1,458	210	14.41	1,669
Haringey	1,547	549	35.51	2,096	333	15.91	2,430
Greenwich	1,449	418	28.83	1,867	203	10.89	2,070
Hammersmith and Fulham	1,340	276	20.58	1,616	63	3.92	1,679
Harrow	542	147	27.11	689	66	9.51	754
Hillingdon	888	150	16.91	1,038	5	0.51	1,043
Hounslow	861	179	20.84	1,041	43	4.15	1,084
Kensington and Chelsea	1,817	182	10.00	1,999	0	0.00	1,999
Kingston upon Thames	658	67	10.16	725	0	0.00	725
Lambeth	2,439	827	33.91	3,266	482	14.75	3,748
Lewisham	2,023	563	27.83	2,586	261	10.09	2,847
Southwark	2,274	778	34.23	3,052	457	14.99	3,510
Merton	804	145	17.99	949	15	1.53	964
Newham	2,164	820	37.89	2,984	525	17.58	3,509
Redbridge	678	251	37.07	929	158	17.01	1,087
Waltham Forest	958	399	41.67	1,357	273	20.12	1,630
Richmond upon Thames	687	69	10.00	756	0	0.00	756
Sutton	568	94	16.59	662	1	0.20	664
Tower Hamlets	1,988	743	37.40	2,731	471	17.24	3,202
Wandsworth	1,663	337	20.28	2,000	73	3.65	2,073
Westminster	2,729	273	10.00	3,002	0	0.00	3,002
England total	191,202	44,898	23.48	236,100	17,300	7.33	253,400
					46,000	18.15	299,400





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